

WBUHS

Question Compilation

(Regular & Supple Questions)

3RD PROFESSIONAL, PART 1 MBBS

All Subject
(Community Medicine, Otorhinolaryngology,
Ophthalmology, Forensic Medicine & Toxicology)

[2008 – '23]

INCLUDING AETCOM QUESTIONS



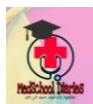

Community Medicine

Syllabus of Community Medicine (Theory)

First Paper	Second Paper
• Concepts of Health & Disease • Epidemiology • Disease screening • Epidemiology Of Communicable & Non-Communicable diseases • Environment & Health • Hospital Waste Management • Health Information & Basic Medical Statistics • Disaster Management • Health Programmes in India	• Demography & Family Planning • Preventive Medicine in Obstetrics, Paediatrics & Geriatrics • Nutrition & Health • Occupational Health • Communication for Health Education • Health planning & Management • Health Care of the community • Medicine & Social Science • International Health • Genetics & Health

Marks distribution (Theory)

Type of Questions	No. to be attempted	Total marks
LONG ESSAY TYPE	2	2×15=30
SHORT ESSAY TYPE	3	3×10=30
SHORT NOTES INCLUDING A.E.T.C.O.M.	2	2×5=10
EXPLANATORY QUESTION	5	5×4=20
MCQ	10	10×1=10
TOTAL		100



REGULAR QUESTIONS

Concepts Of Health & Diseases

Long Questions

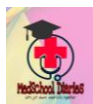
1. Enumerates determinants of health. How environmental and socio-economical conditions worked as determining the health in a community. 4+3+3(2023 P1)
2. What is meant by natural history of disease? Describe the different stages with suitable illustration. Explain how the concept of prevention can be applied in relation to different stages. 2+5+5 (2022 P1)
3. Define Health. Enumerate the various indicators of Health. What is "Health for All"? 2+7+3(2020 P1)
4. What are the characteristics of ideal indicator? Enumerate the morbidity indicators, Describe the Infant mortality rate and case fatality rate 3+3+6 (2018 P1)
5. Enumerate the levels of prevention & modes of intervention in each level. Discuss the level of prevention in context of diabetes. 4+8 (2016 P1)
6. What do you mean by indicators of health? Write down the different disability rates with example. What is the concept of disability limitation? 4+3+5 (15 P1)
7. Describe the natural history of disease? Discuss the different levels of prevention and modes of intervention as applied to Pulmonary TB. 4+8 (2014 P1)
8. What do you mean by multifactorial causation of disease? Describe with suitable examples. 6+6 (2013 P1)
9. Enumerate the determinants of health. How do socio economic conditions act as one of the determinants of health? 4+8 (2011 P1)
10. Define public health. Describe the different determinants of health. 3+9 (05 P1)
11. Describe the natural history of disease and correlate the different levels of preventions and modes of intervention with these phases. 12 (2004 P1)

Short Notes

- | | |
|---|---|
| 1. Human Development Index. (2022,11 P1) | 8. Cost effectiveness analysis in health |
| 2. Iceberg phenomenon of disease. (19 P1) | 9. DALY (2017,14 P1) |
| 3. Healthy lifestyles. (2010 P2) | 10. Quality of life. (2008 P1) |
| 4. Spectrum of disease. (2007 P1) | 11. Primary Prevention. (2007 P1) |
| 5. Public health. (2006 P1)(2021 P2) | 12. Community participations. (06 P1) |
| 6. PQLI. (2005 P1) | 13. Functions & values of physicians(04 P1) |
| 7. Tertiary level of prevention (03) | |

Explain Why

1. Community diagnosis is the first step towards community health action. (2023P1)
2. We need to be more careful about the hidden part of the iceberg. (2022 P1)
3. Goals and Objectives are not synonymous. (2022 P1)
4. There are differences between primordial & primary prevention. (20 P1)
5. Primordial prevention is a subset of primary prevention (2015 P2)
6. WHO definition of 'Health' has defect (2012 P1)

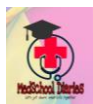


7. Submerged part of the disease iceberg has immense importance to an epidemiologist (2009 P1)

Principles of Epidemiology & Epidemiologic Methods

Long Questions

1. How epidemiological studies are classified? Briefly describe the steps of case control study to find out the association between lung cancer and smoking. 4+6 (2023)
2. Write the National Immunization Schedule for under five children. What is cold chain? Write do's and don'ts while handling a vaccine carrier loaded with vaccine. 6+2+4 (2022 P1)
3. What is epidemiology? Write down the differences between case-control and cohort study. Enumerate different types of biases in analytical epidemiological studies. 2+6+4 (2022 P1)
4. Classify epidemiological studies. Explain the epidemiological feature of cyclic trend & secular trend in disease occurrence with example. What is confounding in epidemiological studies? 4+6+2 (2021 P1)
5. Give a brief account of different types of human reservoir of infection. Describe in brief the methods of controlling reservoir 6+6 (2019 P1)
6. Give a step by step description of how to conduct a descriptive cross-sectional study to assess the extent of overweight and obesity among medical students of your institution. 12 (2019 P1)
7. Enlist the types of epidemiological studies. Discuss the importance of incubation period in epidemiological studies, Describe different time trends in disease occurrence. 3+4+5 (2017 P1)
8. Define epidemiology. How can you estimate the disease risk in case control study? What are the biases in case control study including the process of elimination as applicable? 2+4+6 (2016 P1)
9. Describe the salient features of different types of time trends in disease occurrence with suitable examples. What are the different possible changes over time that you should keep in mind while interpreting time trends 9+3 (14 P1)
10. In your district immunisation rate has fallen to 50%. How would you investigate to find out the reason? How do you concurrently try to increase the immunization rate? 6+6 (2012 P1)
11. What are the different types of epidemics? How would you investigate an epidemic of fever in your block? 4+8 (2012 P1)
12. Define epidemiology? Enlist the type of epidemiological studies. Explain briefly the merits and demerits of case control and cohort study design. 2+4+6 (10 P1)
13. A 7 days old baby is brought to your OPD with excessive cry, refusal of feed & convulsions. Discuss diagnosis, case management & preventive studies as per national immunization program? 12 (2010 P1)
14. Define Epidemiology. Classify epidemiological studies. Mention briefly the important difference between case control and cohort studies. 2+4+6 (09,05 P1)
15. Define epidemiology? Mention the advantages of cohort study. Enumerate the steps of procedures in descriptive epidemiological study. 2+4+6 (2007 P1)



16. Mention some uses of epidemiology. Write down the difference between case control and cohort study. 4+8 (2005 P1)

Short Notes

- | | |
|---|---------------------------------------|
| 1. Importance of incubation period. (21 P1) | 5. Cold chain (2007 P1) |
| 2. Population attributable risk. (2019 P1) | 6. Relative risk (2005 P1) |
| 3. Triple blinding in epidemiological studies (2016 P1) | 7. Incubation period. (2005 P1) |
| 4. Hepatitis B vaccine. (2010 P1) | 8. Standardization of death rate('03) |

Explain Why

1. Pneumococcal conjugate vaccine has been introduced into NIS. (2023P1)
2. Natural history of disease is best established by cohort study. (2023 P1)
3. Pulse polio program is still going on. (2022 P1)
4. Carriers, though less infectious are epidemiologically dangerous. (2017 P1)
5. Use of auto disable syringes in national immunisation program has several advantages,. (2017 P2)
6. Significance of a false positive screening test. (2016 P2)
7. Cohort studies are not always prospective (2015 P1)
8. Carriers are more danger than cases (2013,09 P1)
9. Carrier stage of a disease is not amenable to control. (2010 P1)
10. Live vaccines are more potent 5immunising agent than killed vaccine (2008 P1)
11. Discuss health hazards of immunization. (2008 P1)
12. The terms "Source" & "Reservoir" are not always Synonymous-Explain with examples.(08 P1)

Screening For Diseases

Long Questions

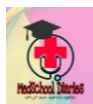
Define screening. How does it differ from diagnostic test? Describe the criteria of screening.2+4+6 (2008 P1)

Short Notes

1. Multiphasic screening (2018 P1)
2. Interpretation of false negatives of a screening test (2012 P1)

Explain Why:

1. Monitoring & surveillance are not synonymous. (2023, 20 P1)
2. Screening and case finding are not synonymous (2022,13 P1)
3. Ideal screening test needs some criteria to be fulfilled (2020 P1)
4. Screening and diagnostic test differ. (2018 P1)
5. Screening test and diagnostic test are not synonymous (2015 P1)
6. Sensitivity and specificity of a screening test are inversely related (2014 P1)
7. Sentinel surveillance of disease is better than periodic mass screening (2010 P1)



Epidemiology of Communicable Disease

Long Questions:

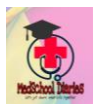
1. A 10 years old boy, scratch by street cat on left leg with oozing of scanty blood. Wound was washed casually by water stored in a bucket. Wound has been dressed along with inj TT, and then referred to emergency dept of a MC. Write down line of management for the boy in present situation. Describe preventive measures for controlling the disease. 10+5 (2023 P1)
2. A 25-year-old person presented in OPD of a primary health centre with cough and fever for one-month, occasional blood-streaked sputum and weight loss. Write down the diagnostic algorithm for the suspected disease as per the relevant national programme. Mention the treatment regimen for drug sensitive cases for adults according to the programme. 6+6 (2022 P1)
3. What are the different modes of transmission of covid 19 infection? Who are high risk groups? Discuss its prevention. 4+4+4 (2021 P1)
4. Mention the objectives of RNTCP. Discuss the new protocol for diagnosing a case of pulmonary tuberculosis & steps of management. 2+5+5 (2020 P2)
5. A case of dog bite has reported to your health centre. How will you categorize the dog bite injury? Describe the local treatment of the wound. Discuss the various available schedules of anti-rabies treatment to be provided as per category of the wound. 3+3+6 (2020, 2019, 2014, 2012, 2010, 2009 P1)
6. What are the cardinal signs of leprosy? How will you classify & treat a case of leprosy according to NLEP guidelines? What are the important complications of leprosy? {How to diagnose & modes of preventions} 2+7+3 (2020, 2008, 2007 P1)
7. There has been a report of deaths owing to Dengue in your district Hospital. How will you manage the situation & take preventive measures to control the problem? {How dengue can be diagnosed} 6+6 (2020, related 2016, 2013, 2010 P1)
8. Vaccination campaign against Measles and Rubella is going to start in a block. Prepare appropriate health education plan for this campaign. 12 (2019 P2)
9. After attending school picnic, large number of students developed 6diarrhoea and vomiting within 12 hours. How will you investigate the problem 12 (2019, 2015 P1)
10. Enumerate diseases under National Vector Borne Disease Control Programme (NVBDCP). Write down a brief note on integrated vector control. Describe in brief the national drug 6policy 2014 on Malaria. 4+4+4 (2018, 2015 P1)
11. A sputum positive pulmonary TB patient was found sputum smear +ve after 5 months of treatment with category –I. what is your inference about the case? What is the next line management as per RNTCP 2+10 (2017 P1)
12. A six months old child was brought by the mother at OPD, presenting with loose stool for more than three times with vomiting from last night. On examination, the child was found restless and drinking eagerly. Classify 6the disease. Outline the management. What information you want to make the mother aware of the situation? 4+6+2 (2017 P1)
13. Significant numbers of cases of jaundice were reported from an urban locality. As a health expert how do you investigate it & what remedial measures do you suggest for the problems 6+6 (2017 P1)



14. Mention the modes of transmission of HIV or AIDS, Explain the role of high risk group and bridge population in HIV transmission, Outline the strategies undertaken In national program to reduce transmission from high-risk group. 2+3+7 (2016 P1)
15. Cases of adverse events following immunisation (AEFI) are being reported from sub centres of a Block. Due to apprehensions among people drop outs for Immunisation are also being increased. How the AEFI are classified – mention with examples. Describe important health managerial functions / measures needed to be under taken to address and overcome the problems in that Block. 4+8 (2014 P2)
16. Illustrate how the levels of prevention and modes of intervention can be applied to Poliomyelitis. 12 (2010 P1)
17. Glve a brief account of epidemiology gf Kala-azar. Briefly outline the strategies of control of Kala-azar. Enumerate the causes of resurgence of Kala-azar, 5+4+3 (2009 P1)
18. A two years old child with history of passing watery stool every 2-3 hours, who is restless with dry mouth & sunken eye has been brought to the sub centre. How the health workers assess, classify & manage the case. What advise should be given to the mother for prevention of occurrence of such condition in future 8+4 (08 P1)
19. A six months old infant with ARI have a respiratory rate of 56/min. There is no chest indrawing & no dangerous sign, Classify the ARI with justification & discuss management accordingly. 4+8 (2007 P1)
20. About 40 cases of malaria have been detected in a Block Primary Health Centre in the month of August, 2006, As a BMOH what measures will you take to control such situation? 12 (2007 P1)
21. Enumerate three important parameters used for measuring malaria problem in your community. Discuss briefly the strategies adopted under National Anti-Malarial Programme in high-risk rural areas. 3+9 (2005 P1)
22. In a rural area a case of Pulmonary TB was detected in a women age 30 years. She has one 36 months old child (given BCG vaccination) & husband age 40 years. What will be the line of management for the case according to RNTCP, if she fulfills one of the criteria of category I? What will be the three most important communication messages for the community for prevention of TB? 6+3+3 (05 P1)
23. There are 10 cases of typhoid fever occurred in a student hostel. How will you investigate? 12 (2005 P1)
24. How will you investigate a measles outbreak from an urban slum? 12 (2005 P1)A case of AFP of 4 yrs. Old boy has been reported from a village in south24 pgs. District. Outline measures to be taken by the BMOH as per strategies of polio eradication. 12 (2004 P1)
25. Name the common STDs. What measures do you suggest for its prevention and control with special reference to HIV/AIDS? 4+8 (2004 P1)
26. What are the causes of setbacks of malaria in our country? Describe in brief the strategies followed under Malaria Eradication Program. 4+8 (2003 P1)
27. Case of neonatal tetanus is being reported from your block. As a BMOH, how will you proceed to investigate the situation? 6+6 (2003 P1)
28. AIDS no longer limited to high-risk population. Explain and discuss methods by which the disease can be prevented, 3+9 (2003 P1)

Short Notes:

1. Integrated vector management. (2021 P1)



2. Mass drug administration for soil transmitted helminthes. (2020 P1)
3. Laboratory network under RNTCP (2016 P1)
4. Intra-dermal rabies vaccination. (2013 P1)
5. Chemotherapy of Multi-bacillary Leprosy. (2012 P1)
6. BCG Vaccine. (2009,03 P1)
7. Management of Dengue Haemorrhagic Fever. (2007 P1)
8. Symptoms and signs of Dengue Fever. (2005 P1)

Explain Why:

1. Zinc is important in the treatment of diarrhea (2023 P1)
2. Tuberculosis is an old disease but a new threat. (2021 P1)
3. Isolation & quarantine are not synonymous. (2021,16 P1)
4. AIDS is a behavioural disease. (2020 P1)
5. Rehabilitation is an integral part of leprosy control. (2009 P1)
6. Sputum smear examination is the method of choice for finding in TB (2015 P1)
7. Hepatitis B infection should be considered more dangerous than HIV infection (2013 P1)
8. All influenza pandemics are caused by influenza A and not by B or C (2012 P1)
9. Revised National Tuberculosis Control Programme gives priority on detection of new smear positive cases (2012 P1)
10. Vitamin A supplementation is necessary after Measles infection (2011 P1)
11. AEFI include events beyond side effects of vaccines (2011 P1)
12. Role pre-test & counseling for HIV/AIDS is useful (2010 P1)
13. Role of IPV in polio eradication (2010 P1)
14. Syndromic management of STD is most, appropriate approach in India (2009 P1)
15. INDIA is a Yellow Fever receptive area (2009 P1)
16. Discuss active surveillance in Malaria. (2008 P1)
17. Explain the rationality of giving Hepatitis B vaccine in infants, (2007 P1).

Epidemiology of Non-Communicable Diseases

Long Questions

1. What is carcinoma-in-situ? Mention its importance. How is the screening of cervical cancer done at community level? Enumerate the risk factors of cervical cancer. 2+4+5+4 (2023 P1)
2. Name 4 non-communicable diseases of public health importance in India. Describe risk factors and preventive measures of one of the mentioned non-communicable disease. 2+5+5 (2022 P1)
3. Risk factor of hypertension is multiple. Identify the modifiable risk factors for hypertension & briefly discuss the non-pharmacologic components in management of hypertension. 4+8 (2021 P1)
4. A 35 years sedentary obese man with smoking habit is found to have blood pressure of 126/100 mm. of Hg. How will you classify this blood pressure? Describe the management with special emphasis on diet of the person. 4+8 (2018 P1)
5. Many school students in your block are found suffering from reduce ability to see the board-work by the teachers in the classroom .as BMOH how will you manage the situation 12 (2018 P1)



6. What do you mean by Essential Hypertension? What is prevalence in India? What are the risk factors for it? What preventive measures should you take to reduce prevalence and complication due to hypertension? 2+2+3+5 (2015 P1)
7. Rising trends in the occurrence of diabetes has been observed throughout the India. Describe the epidemiological determinants of diabetes. Discuss the methods of primary prevention of type 2 diabetes. 7+5 (2014 P1)
8. What are the early signs of cancer? Describe in brief of the epidemiology of oral cancer and its primary level of prevention. 4+4+4 (2013 P1)
9. What are the risk factors of coronary heart diseases? Describe the different measures to prevent and control of coronary heart diseases, 8+4 (2012 P1)
10. Enumerate the cancers most frequently, found in India. What are the early warning signs of cancer? Describe some preventive measures against carcinoma cervix. 2+4+6 (2009 P1)
11. Your BPHC situated by the side of a busy highway. Cases of road traffic accidents (RTA) are common. Describe the measures you would take as BMOH to reduce the problem. 12 (2009 P1)
12. What are the Danger Signals of Cancer? Outline the epidemiology of oral cancer and methods of its prevention in the community. 3+4+5 (2008 P1)

Short Notes

1. Life style management to prevent Diabetes Mellitus. (2022 P1)
2. Social factors related to mental health problem (2021 P2)
3. Modifiable risk factors of hypertension. (2017,14 P2)
4. Cancer registry (2016 P1)
5. Preventable blindness. (2014 P1)
6. Risk factors of Diabetes. (2008,07 P1)
7. Warning signs of cancer. (2005 P1)

Explain Why

1. Majority of blindness can be prevented. (2017 P1)
2. BMI is the best of all indices of obesity. (2015 P1)
3. Lung cancer can be prevented by primary preventive Measures (2012 P1)

Environment & Health

Long Questions

1. Enumerate the sources of air pollution. Name any four air pollutants. Describe the effects of air pollution, How air pollution can be controlled? 2+2+3+5 (2022 P1)
2. Mention the characteristics of safe & wholesome water. Classify water borne diseases, Briefly discuss the three methods for water purification at household level, 2+4+6 (2021 P1)
3. What are the causes of air pollution? Mention its effects on human health. How air pollution can be prevented and controlled? 3+3+6 (2019 P1)
4. Define "safe and wholesome water", Discuss the different tests for the bacteriological surveillance of drinking water, 4+8 (2013 P1)

Short Notes

1. Biochemical oxygen demand. (21 P1)
2. Biological filter. (2020 P1)
3. Indoor air pollution. (2018 P1)
4. Sanitation barrier. (2018,04 P1)
5. Biological treatment of sewage. (13 P1)
6. Principle of chlorination of water. (13 P1)
7. Integrated vector management. (12 P1)
8. Hazards of noise pollution. (2011 P1)



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|---|---|
| 5. Types of ventilation (2017 P1) | 12. Sanitary landfill. (2011 P1) |
| 6. Bacterial indicators of drinking water quality(11) | 13. Water borne diseases. (2010 P1) |
| | 14.Overcrowding (2010 P1) |
| 7. Biological transmission. (2009,08 P1) | 15.Indicators of air pollution. (2009 P1) |

Explain Why

1. The mere addition of chlorine to water is not chlorination. (2019 P1)
2. Integrated vector management is the most effective method of vector control.(2016 P1)
3. Overcrowding is a health hazard (2013 P1)
4. Sanitation barrier aims at breaking the transmission cycle of faecal borne Diseases (2011 P1)
5. Overcrowding can Influence health(2007 P1)

Hospital Waste Management

Long Questions

1. Name the different types of biomedical wastes generated in your hospital. Write the measures for their disposal as per national guidelines. 4+3+3 (2023P1)
2. What is biomedical waste? What are the health hazards of improper handling of biomedical waste? Briefly describe the process of disposal from generation site to point of disposal of different categories of biomedical wastes. 2+3+7 (2020 P1)
3. A recent public demonstration has occurred in a block primary health centre about the disposal of biomedical waste contaminating water body by the side of the hospital. As a BMOH of the hospital what measures would you like to adopt for proper waste management of your hospital. 12 (2016 P1)
4. Name the different types of biomedical waste generated in your hospital. Suggest measures for their disposal as per National and State Level rules. What is the importance of waste tracking? 3+7+2 (2012 P1)

Short Notes

1. Principles of Biomedical Waste management. (2015 P1)
2. Hospital waste management. (2005 P1)

Explain Why

1. There are 4 types of colour coding bags as per biomedical waste management rule 2016, amended at 2018. (2021 P1)
2. Injection safety is important for the recipient, provider and community (18 P1)
3. Biomedical waste should be segregated at source. (2017 P1)
4. Sterilisation & disinfection are not synonymous (2017 P1)

Health Information & Basic Medical Statistics



Long Questions

1. What is sampling? What are the different types of sampling? Describe them briefly with their advantages and limitations. 2+4+6 (2013 P1)

Short Notes

1. Graphical representation of Statistical Data (2023 P1)
2. Normal curve. (2022,13 P1)
3. Measures of dispersion (21,16,12,05 P1)
4. Simple random sampling. (2019 P1)
5. Rate, ratio and proportion. (2019 P1)
6. Standard normal curve. (2018,10 P1)
7. Types of sampling. (2015 P1)
8. Statistical Averages. (2012,04 P1)
9. Source of health information. (18,11 P1)
10. Sampling. (2009 P1)
11. Bar diagram. (2007 P1)
12. Values of dispersion. (2003 P1)

Explain Why

1. The terms 'normal curve' and 'standard normal curve' are not synonymous. (19 P1)
2. Data carry little meaning when considered alone. (2018 P1)
3. The census is an important tool of health information. (2016 P1)
4. For small samples, median is a better measure of central tendency than mean. (2014 P1)

Disaster Management

Long Questions

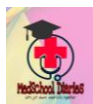
1. Define disaster. What are the common disasters faced by people of India? Name one natural and one manmade disaster in recent past. As a BMOH of a BPHC located near a coastal area what preparedness would you have to manage disaster? 2+5+2+6(2023 P2)
2. What is disaster? Management in Relation to recent cyclone Amphan 3+9 (21 P1)
3. What do you mean by "Disaster"? What are common causes of disaster? As a BMOH of a cyclone prone block how will you proceed for preparedness to tackle the impending disaster in your block? 2+3+7 (2015 P1)
4. Enumerate different health hazards occur during and following flood..As a BMOH describe your preparedness plan to mitigate such hazards in future. 12 (2011 P1)
5. What is disaster? What are aspects of disaster management? Outline the management aspect of disaster impact in a flood prone area. 2+2+8 (2012, 09 P1)

Short Notes

1. Vaccination in disaster. (2018 P1)
2. Triage. (2018 P2)
3. Disaster preparedness (2014,08 P1)

Explain Why

1. Triage approach can provide maximum benefits in disaster situation. (2016 P1)



Health Programmes in India

Long Questions

1. What is full form of ASHA? Write down the eligibility criteria for selecting ASHA in West Bengal. Give a brief outline of role of ASHA in maternal and new-born care, 2+4+6 (2019 P2)
2. What do you mean Essential Obstetric Care? What are the services delivered under Essential Obstetric Care according to RCH II programme? What is the importance of Maternal Death review? 2+7+3 (2015 P2)
3. What are the health problems of adolescent? Mention the National Programmes concerning improvement of adolescent health. Outline four important health educational messages for benefit of an adolescent girl. 3+9 (2014 P2)
4. Enumerate different components of ICDS programme. 12 (2013 P2)
5. Mention the package of services under RCH programme. Outline as to how the services are provided through different levels of health care facilities available in a block. 4+8 (2013 P2)
6. Enumerate the different vector borne diseases, Describe the principle of vector control programme according to the existing National Programme. 4+8 (2012 P2)
7. Enumerate major causes of blindness in India. Outline the strategies adopted for control blindness under National Programme. 4+8 (2011 P1)
8. How RCH programme differ from CS & SMP? Describe briefly the packages of service provided under RCH programme. 4+8 (2008 P2)
9. Define RCH. Mention the package of services under RCH. How does this programme differ from the previous ones on MCH in India? 3+6+3 (2006 P2)
10. Define RCH. What are the packages of services for mothers in this programme? What are the key components of growth monitoring? 2+7+3 (2005 P2)
11. Define Reproductive and Child Health. Enumerate the components of RCH. Describe in short the RCH package of services for pregnant women. 2+2+8 (04 P2)
12. What are the goals of CS and SMP? Write in brief the different components of RCH programme in our country. 4+8 (2003 P2)

Short Notes

1. Janani – Shishu Suraksha Karyakram, (2022 P2)
2. VHND (2021,14 P2)
2. Functions of Anganwadi workers. (2007 P2)

Explain Why

1. ICTC should be supported by ART/link ART Centre (2014 P2)
2. Revised ICDS growth chart currently in operation differ from earlier one (11 P2)
3. ASHA links health care delivery with community. (2010 P2)

Demography & Family Planning

Long Questions:



1. Describe the modern contraceptive methods approved for use in India. What is the 'Cafeteria Choice'? How the contraceptive services are delivered to the community in a rural area? 6+2+2 (2023 P2)
2. In a Block in W.B, Couple Protection rate is much less as compared to neighbouring blocks. What measures will you take as BMOH to improve the situation? Mention Goals of National Population policy. 9+3 (2020 P2)
3. A 28 years old mother with children aged 4 year and 1 year, has come to you for family planning advice, Describe different methods of contraception that can be offered to her with merits and demerits, 12 (2018 P2)
4. Write down the National Socio Demographic Goals for 2015. Outline the steps for evaluation of Family Planning Programme, 6+6 (2015 P2)
5. Define "sex ratio". What are the factors behind declining sex ratio in India? What are the measures adopted to correct the situation? 2+4+6 (2015 P2)
6. In a block of Nadia district CPR (couple protection rate) is less in comparison to neighbouring blocks. What are the social causes of poor CPR and what measures will you take up as a BMOH to improve the situation? 4+8 (2014, 07,04 P2)
7. Enumerate fertility indicators. What do you mean by NRR=1? Write in brief the advantages and disadvantages of contraceptive methods which an eligible Couple should adopt in different phases of their reproductive life to achieve 'Small family norm'. 3+2+7 (2009 P2)
8. A 25 years old mother with 2 children aged 5 years and 1 year, has come to the OPD for family planning advice. Discuss different methods of contraception that can be offered to her with merits & demerits. 12 (2008 P2)
9. Define conventional contraceptives. What contraceptive method would you like to recommend to a couple aged 30 yrs. Having only one breast fed baby, husband is alcoholic and why? 3+9 (2006 P2)
10. Define demography. Briefly discuss the different demographic characteristics of India. 2+10 (2005 P2)
11. What are the national demographic goals? Discuss the new revised population policy. 4+8 (2003 P2)

Short Notes:

- | | |
|---|------------------------------------|
| 1. Injectable contraceptives. (2022,20 P2) | 6. Unmet need for family planning. |
| 2. Merits of a joint family. (2020 P2) | (2011 P2) |
| 3. Stages of demographic cycle. (2019 P2) | 7. Genetic counseling. (2005 P2) |
| 4. Prioritization in health planning. (2019 P2) | 8. Copper T. (2005 P2) |
| 5. Family Planning | |

Explain Why

1. Acculturation has both merits & demerits (2022 P2)
2. Demographic transition has a role in economic growth of nation (2022 P2)
3. Census is an important source of health information (2021 P1)
4. Declining sex ratio had many adverse consequences (2021 P2)
5. Sample registration system provides more reliable estimates of birth and death rates at the national and state level than other existing systems. (2019 P1)
6. Family as a unit of health. (2019 P2)
7. Family performs many functions (2018 P2)



8. India is in the third stage of the demographic cycle. (2016 P2)
9. NRR may be regarded superior method to GRR for measuring population growth (15 P2)
10. Population pyramid is important for public health. (2014 P2)

Preventive Medicine in Obstetrics, Paediatrics & Geriatrics

Long Questions

1. Define perinatal mortality rate. Mention the different causes of perinatal mortality in India. What are the goals of India Newborn Action Plan (INAP)? 2+8+2 (2022, rel 2004 P2)
2. Define Geriatrics. Enumerate the common health problems of elderly in our country. Discuss their control and preventive measures, 2+5+5 (2022 P2)
3. Define infant mortality rate (IMR). Mention important cause of IMR. Describe important socio-cultural factors affecting infant mortality. 2+5+5 (2021 P2)
4. What are the different maternal health problem in India. Explain antenatal care. 6+6 (2021 P2)
5. Define Maternal Mortality Ratio (MMR). Outline of the strategies under national programme to bring down the maternal mortality in India. Give a brief account of Maternal Death Review at community level. 12 (2019 P2)
6. Considering its effect on present and future lives of children, name the most important anthropometric indicator of undernutrition with justification. Enumerate the components of IYCF. Write down the steps of 14 counseling of a woman with a three month old child and complaining of 'not enough milk. 3+4+5 (2019 P2)
7. A recently delivered (2 weeks back) mother has come for check up. Mention the components of post natal check up. What might be the post natal complications? What measures can be taken to improve post natal care at community level (18 P2)
8. In a block of west Bengal, recent statistics showed a lower rate of institutional delivery. As a health administrator of, that block, what measures you like to adopt for improving institutional delivery in your block. 12 (2017 P2)
9. What do you mean by neonatal mortality? Why is it so important? Write in brief the components of essential newborn care with special reference to breast feeding. 2+3+7(2016 P2)
10. Define "Low Birth Weight ". What is its prevalence in India and the target to achieve? What measures would you like to adopt as BMOH to reduce the Low Birth Weight in your block. 2+2+8 (2015 P2)
11. Define Maternal mortality ratio and maternal mortality rate. Describe the important cultural and social factor affecting infant mortality. 4+4+4 (2014 P2)
12. Prepare an action plan to conduct an IEC campaign in your block to reduce anaemia among pregnant women. 12 (2010 P2)
13. IMR is high in your block. As a BMOH suggest measures to improve the situation. 12(2010 P2)
14. Proportion of low birth weight babies in your block is very high. As a BMOH what action will you take to tackle the situation? 12 (2009 P2)



15. Enumerate the nutritional problems in our country. What are the services under ICDS Scheme? What are the functions of AWW? 3+5+4 (2006 P2)
16. What is meant by LBW? How are such babies classified? What are the social factors responsible for LBW children? What could be the preventive measures for LBW? 2+2+4+4 (2005 P2)
17. What do you understand by Post Natal care? Describe in brief to be provided to the mother and newborn after delivery? 2+5+5 (2003 P2)

Short Notes:

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|--|---|
| 1. IMR current scenario in India (2020 P2) | 8. Kangaroo care. (2012 P2) |
| 2. Facility based newborn care. (2016 P2) | 9. Interpretation of ICDS Growth Chart. (2008 P2) |
| 3. Geriatrics health problems. (2015 P2) | 10. Different aspects of School Health Service. (2008 P2) |
| 4. Juvenile delinquency. (2015,13,04 P2) | 11. BFHI (2008,03 P2) |
| 5. Health problems of Geriatric population. (2013,09 P2) | 12. Newborn Care. (2004 P2) |
| 6. PNDT Act. (2013 P2) | |
| 7. Child labour. (2012 P2) | |

Explain Why:

1. Home based neonatal care is an essential intervention in preventing neonatal death. (2023 P2)
2. Breast milk is ideal & only food for infants till 6 months of age. (2021 P2)
3. FRUS will reduce MMR. (2017, 09 P2)
4. Apart from growth monitoring, 'Growth chart' has many other uses (2015,10 P2)
5. Institutional deliveries can reduce maternal mortality to a great extent (2010 P2)
6. Use of growth chart is quick method for identification of under nutrition. (09 P2)
7. IMR is considered very sensitive indicator of health status (2007 P2)
8. Mother and child is a priority group for health Intervention (2007 P2)

Nutrition & Health

Long Questions

1. A 5 years old boy is taken to Pediatric OPD. His mother tells that he cannot see properly in dim light during night. On examination, triangular pearly white foamy spots were found on bulbar conjunctiva of both the eyes. 1+5+3+2+4
 - i) Which micronutrient is responsible for above condition?
 - ii) Describe the symptoms and sign of that micronutrient deficiency.
 - iii) How the boy can be treated?
 - iv) What are the dietary sources of that micronutrient?
 - v) Briefly describe the National Health Program related to this health problem
2. A large number of children are reported to be suffering from severe acute malnutrition in a rural block of a district. Briefly mention the steps that can be taken for screening and management of these cases. 4+8 (2022, 2012 P2)
3. How do you assess the nutritional status of family? Explain Diet survey & its types. 6+6 (2020, 2017P2)



4. Mention the causes and detrimental effects of nutritional anemia. Describe the measures undertaken to combat anemia among adolescents according to national Program. 4+4+4 (2018 P2)
5. Name the important inorganic chemicals of health significance present in ground water of West Bengal. Describe in brief the health effects & control measures of any one. 2+5+5 (2017 P1)
6. Enlist the disorders caused by iodine deficiency. What are the strategies to control iodine deficiency disorders in India? 6+6 (2017 P2)
7. What is a balanced diet? Enumerate different nutritional problems prevalent in India. How primary prevention plays an important role in prevention of protein energy undernutrition 2+4+6 (2017 P2)
8. Define malnutrition. How will you assess the quality of a protein? Name the nutritional programme currently available in India. Discuss any one of them. 2+3+2+5 (2016 P2)
9. Enumerate four major nutritional problems in our country. How would you assess the nutritional status of the under five in a community? 2+10 (2012 P2)
10. What is malnutrition? Discuss its prevention strategies in terms of different levels of preventions. 4+8 (2011 P2)
11. Enumerate different types of food intoxicants. Suggest measures to control epidemic dropsy in your area. 12 (2010 P2)
12. What is micronutrient? Name four important micronutrients. Discuss spectrum of iodine deficiency disorders and National Programme associated with it. 2+2+4+4 (2007 P2)
13. How will you assess the nutritional status of under five in an urban slum community-discuss briefly? Enumerate the important factors causing malnutrition. 7+5 (2004 P2)
14. How would you proceed for nutritional assessment of preschool children in a community? 12 (2003 P2)

Short Notes:

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|---|--|
| 1. Food fortification (2023 P2) | 8. Prevention of IDD. (2020 P2) |
| 2. Food additives. (2020 P1) | 9. Neurolathyrism (2017 P2) |
| 3. Endemic fluorosis (2017, 04 P2) | 10. Pasteurization of milk. (2016,07 P2) |
| 4. Food safety. (2016 P2) | |
| 5. Spectrum of iodine deficiency disorders. (2011 P2) | |
| 6. Common homemade oral rehydration solution. (2010 P2) | |
| 7. Balanced diet. (2006 P2) | |

Explain Why:

1. Parboiled rice is nutritionally superior to milled rice. (2021,18,11 P2)
2. Iodization of salt is a good example of food fortification. (2020 P2)
3. Vitamin A deficiency is related to many ocular & extra ocular manifestation(2020 P2)
4. Combining rice and pulse in diet is a good practice. (2019 P2)
5. Zinc is given with ORS in treatment of 'Diarrhoea (2018 P2)
6. ORS is an example of appropriate technology. (2018 P2)
7. Supplementary nutrition & therapeutic nutrition is different. (2017 P2)
8. Food additives and food adulteration are not synonymous. (2013 P2)
9. Short term high dose Vit. A supplementation is useful for prevention of
10. Xerophthalmia. (2012 P2)



11. IDD is a social and preventable problem. (2012 P2)
12. Fluorine is often called a two edged sword. (2012 P2)
13. Supplementary nutrition and therapeutic nutrition are different. (2007 P2)

Occupational Health

Long Questions

1. Enumerate various laws/ acts protecting health of worker in India. Describe the medical benefits and their modes of provision to the beneficiary under ESI act. 4+6 (2023 P2)
2. What is pneumoconiosis? Enumerate the different type of causative factors responsible for pneumoconiosis. What are the measures to be undertaken to prevent pneumoconiosis? 2+4+6 (2022 P2)
3. Enumerate different types of occupational hazards with example. Outline the measure to prevent one of those,6+6 (2021 P2)
4. Define social security. Mention different benefits available for the industrial worker under ESI Act. Discuss medical benefits. 2+4+6 (2021, 07 P2)
5. What are the eligibility criteria for enrolment in ESI Scheme? Describe the benefits under ESI Scheme. 3+9 (2020 P2)
6. In an accident in a factory, a male worker lost his left lower limb below thigh. Enumerate the benefits he is entitled to under ESI Act, In case of death of the worker what are the benefits his family is entitled to get? What are the steps to be taken from the management to prevent future occurrence of such event? 6+3+3 (2019 P2)
7. What are the eligibility criteria for enrolment in ESI scheme? Write in brief the benefits available under ESI scheme during and after working tenure. What are the services available under medical benefits? 4+4+4 (2016 P2)
8. Define "Factory" under Indian Factories Act 1948. Write in brief the provisions recommended in Indian Factories Act 1948 to protect health of the workers. 2+10 (2015 P2)
9. Many cases of silicosis were reported from a Pottery and Ceramic industry. As an Industry Health Officer, what measures will you recommend for prevention and control the problem. 12 (2014 P2)
10. Name the types of occupational hazards. Describe the different medical measures for prevention of occupational disease. 4+8 (2013, 05, 04 P2)
11. Define Ergonomics. Discuss the importance of pre placement examination with suitable example. 12 (2010 P2)
12. What is Pneumoconiosis? Enumerate its different types with causative factors. Enumerate the benefits provided under ESI Act and describe any one of them which is relevant to Pneumoconiosis. 2+3+3+4 (2008 P2)
13. What is sickness absenteeism? How to prevent occupational lung disease in an industry. 4+8 (2006 P2)
14. Enumerate the different benefits under ESI scheme, Discuss sickness benefits in details. 5+7 (2005 P2).
15. What is social security? Discuss the social security provisions for female workers under the Indian Factories Act. 4+8 (2003 P2)



Short Notes

- | | |
|---|---|
| 1. Hazards of radiation. (2015 P1) | 5. Health problems of agricultural workers. (2005 P2) |
| 2. Sickness absenteeism. (2014 P2) | 6. Asbestosis. (2003 P2) |
| 3. Pre-placement examination. (2012 P2) | 7. Problems of industrialization. (08 P2) |
| 4. Ergonomics. (2011 P2) | |

Explain Why

1. A farmer may suffer from various occupational hazards. (2020 P2)
2. Social security measures have a great role in preventing the health problems-explain with examples. (2014 P2)
3. Periodical examination is effective in prevention of occupational diseases (11 P2)

Communication For Health Education

Short Notes

- | | |
|---|------------------------------------|
| 1. Explain the "Doctor Patient Relationship" in community setting. {AETCOM} (2023 P1) | |
| 2. Communication Process, (2022 P2) | 5. Role playing (2015,05 P2) |
| 3. Barriers of communication.(2021,19 P2) | 6. Channels of communication(09P2) |
| 4. Intersectoral co-ordination (2008 P2) | |

Explain Why

1. Telemedicine is now an important field in medical communication. (2020 P2)
2. Interpersonal communication is more effective in behavioral change than mass communication, (2019,13 P2)
3. Group discussion is an effective approach of communication. (2007 P2)
4. Explain main components of communication process. (2007 P2)

Heath Planning & Management

Long Questions

1. Immunisation drop outs and left outs are found to be quite high for consecutive years in a block. Mention the possible reasons and outline the measures that can be adopted by the health administrator in that block to improve the situation.4+8 (2016 P2)
2. In a block 40% of eligible couples are protected by modern contraceptive methods. As a BMOH outline the intervention to improve the situation. 12 (13 P2)
3. Maternal mortality ratio in a block is found to be persistently high. As a BMOH outline he – Investigation procedure to find out the causes of maternal mortality and Intervention to be adopted to reduce the MMR. 6+6 (2013. 07 P2)
4. There is sudden rise of infant 18mortality rate in a block. What are the measures you would like to adopt to reduce the IMR in block? 4+8 (2012 P2)



5. Percentage of fully immunized children is very low while left out & drop rates are unacceptably high in your block. What measures you will adopt as a BMOH to improve the situation? 12 (2011 P2)
6. Proportion of institutional delivery is very low in your district. There is also poor arrangement of JSY referral transport & Ayushman scheme. What steps you would take as a CMOH to improve the situation? 12 (2011 P2)
7. Define health education. How it differs from BCC? Briefly outline the different health education measures to prevent cervical cancer as a BMOH. 12 (2011 P2)
8. As a BMOH, you note that people prefer quacks rather than your services, should you be concerned and why? What will you do about it? 5+7 (2009 P2)
9. Few cases of HMT has been reported from a block of district as a BMOH what measures will you take to prevent further occurrence 10 (2008 P2)
10. Many women in your block suffer from nutritional anaemia. As a BMOH how will you assess the problem and manage it. 12 (2007 P2)

Short Notes: Budgeting. (2019 P2)

Explain Why

1. Prioritization is an important prerequisite health planning. (2023, 2016,14,11 P2)
2. "Feedback" is very important in health planning. (2015 P2)
3. Cost effective analysis and cost benefit analysis are not synonymous (2013 P2)
4. Management consists of 4 basic activities (2009 P2)

Health Care of The Community

Long Questions:

1. What is Primary Health Centre? Enumerate elements of Primary Health Care. Describe the principles of primary health care. Enumerate the services provided at a Primary Health Centre. Discuss the role of medical officer in PHC. 2+3+5+5 (2023, 20 P2)
2. Enumerate the functions of primary health centre. What are the services provided by sub centre? 6+6 (2021, 18 P2)
3. Enumerate the objectives of school health programs. Briefly mention different components under the programme. 6+6 (2017 P2)
4. What are the average populations catered in relation to health- in a village, sub-centre, PHC, BPHC or CHC? Who serves at the level of sub-Centre? What are the activities carried out at BPHC/CHC? 3+2+7 (2016 P2)
5. What are the functions of Block Primary Health Centre? Mention the National Programs under a BPHC. What is "Record Linkage" and what is Tracking of Beneficiaries under Maternal Child Health Care. 4+4+2+2 (2014 P1)
6. Discuss the three tier system of Health Care Delivery of your state. What are the reforms made to give better service to people? Discuss the role of Private Partner Partnership (PPP) in efficient delivery of health services. 2+4+6 (12, 04 P2)
7. Enumerate the principles of PHC. How is it delivered in rural area? 4+8 (11,04 P2)

Short Notes



1. Principles of primary health care with examples (2016, 10 P2)
2. Preventive services offered by your Medical College & Hospital. (2014 P1)
3. Central Government Health Scheme (13 P2)
4. Health insurance scheme. (2012 P2)
5. Voluntary Health Agency. (2011 P2)
6. FRU. (2004 P2)
7. Elements of PHC (2009 P2)
8. Inter sectoral coordination. (08)

Explain Why:

1. Cost effectiveness analysis is suitable than cost benefit analysis in health sector. (18P2)
2. Community participation is essential for Success of public health programme (2016 P2)
3. Accessibility can't be equated with acceptability of health services (14 P2)
4. Equitable distribution of health services an important principle of PHC (2013 P2)
5. Networking with voluntary health agencies plays an important role in health care delivery (2010 P2)
6. Sub-Centre as the pivot of the healthcare delivery system in rural areas. (2009 P2)
7. Primary Health Care is basically the responsibility of the state. (2008 P2)
8. Medical care and health care are not synonymous. (2008 P2)

Medicine & Social Science

Long Questions:

1. Enumerate types of family. Describe the stages of family cycle. Discuss the role of family in health and disease. 2+4+6 (2010 P2)
2. Define social security. Briefly discuss any one of the social security systems in our country. 2+10 (2009 P2)

Short Notes:

1. Social stress (2017 P2)
2. Social 20ounseling20n. (2015 P2)
3. Acculturation. (2005 P2)

Explain Why:

1. Crowd and mob are different (2023P2)
2. Doctor patient relationship plays a vital role in care of disease. (2021 P2)
3. Customs are not always deleterious to health. (2019 P2)

International Health

Short Notes:

1. International Health Regulation (2023P2)
2. Functions of WHO . (2022 P2)
3. Indian Red Cross Society. (2020,17 P2)
5. Non-Government organization. (2014 P2)
6. CARE –India. (2010 P2)



4. UNICEF. (2009,07 P2)

Explain Why

1. International 21organisations have many roles to play in control of pandemic (07 P2)

Genetics & Health

Short Notes :

1. Genetic 21counseling (2005 P2)

Explain why

1. Prospective Genetic counseling is more rewarding. (2023 P2)
2. Mental Health Services are coming forefront. (2023 P2)
3. Importance of genetic 21counseling in preventing the genetic disorders (2017 P2)

SUPPLE QUESTIONS

Concept of Health & Diseases

Long Questions

1. What are the differences between disease control, disease elimination and disease eradication? Briefly describe the concept of levels of prevention and modes of intervention in the natural history of disease. 4+3+5 (19 P1)
2. Enumerate the mortality indicators. Detail the Standardised Mortality Ratio. 6+6 (18 P1)
3. Enumerate the levels prevention and different modes of intervention in each level. Discuss the levels of prevention in context to diabetes. 4+8 (17 P1)
4. What is iceberg phenomenon of disease? What do you mean by lead time? What are the uses of screening? Elaborate the basis on which a disease is selected for screening. 2+4+6 (17 P1)
5. Enumerate the determinants of health. How do health services act as one of the determinants of health? 4+8 (15 P1)
6. What do you mean by risk factors? How they differ from agent factors? Risk factors are related to which type of diseases? Briefly describe the intervention strategy of a disease with risk factors 2+2+2+6 (14 P1)
7. What is called an ideal health indicator? What are different mortality indicators? Discuss in brief measures taken to reduce one of them. 4+4+4 (12 P1)
8. Discuss briefly the different time trends of disease occurrence with their significance. 12 (11 P1)
9. What are the different modes of transmission of disease? Explain with suitable example how knowledge of transmission dynamics is applied in prevention and control of disease. 6+6 (11 P1)



10. Enumerate different modes of intervention under levels of prevention. Discuss in brief, the levels of prevention in relation to leprosy. 2+4+6 (10 P1)
11. Enumerate different modes of intervention under levels of prevention. How these intervention strategies can be applied in coronary heart disease. 6+6 (09 P1)
12. Define health. Describe the determinants of health. 2+10 (08 P1)

Short Notes

- | | |
|--|---|
| 1. Social determinants of health (21 P2) | 4. Sentinel surveillance (11 P1) |
| 2. Multifactorial causation of disease (17 P1) | 5. Levels of prevention (08 P1) |
| 3. Rehabilitation (12 P1) | 6. Iceberg phenomenon of disease (08P1) |

Explain Why

1. Positive predictive value depends on the prevalence of a disease (19 P1)
2. Primary health care is essential health care (15 P1)
3. Monitoring and surveillance are different in public health (15 P1)
4. The words 'Disability' and 'Handicap' are not synonymous (13 P1)

Principles of Epidemiology & Epidemiologic Methods

Long Questions

1. Classify different types of epidemiological studies. Briefly describe the steps and method of analysis while you want to ascertain the role of oral contraceptive pills for causation of deep vein thrombosis among females. 4+4+4 (21 P1)
2. What are the different types of epidemic? How would you investigate an epidemic of fever in your block? 6+6 (20 P1)
3. Define epidemiology. Mention the different types of epidemiological study. What are uses of epidemiology? Differentiate case control and cohort study. 2+2+3+5 (19 P1)
4. As a 6th semester student, you are required to conduct a research project on "Prevalence of hypertension among medical students of your institution" within a period of three months. What type and design of epidemiological study will you adopt? Describe in brief the steps of the study. 4+4+4 (18 P1)
Similar : Design a suitable study to study the association between lung cancer and cigarette smoking where the sample size has been selected is 250 (12P1)
5. How clinical medicine differs from epidemiology? Discuss different type of epidemics with examples 4+8 (16 P1)
6. What are the indications of a cohort study? Mention the advantages of Cohort study. State the steps of a case control study. 2+4+6 (13 P1)
7. A child aged 10 months remains unimmunised. Advice immunisation of the child till 6 years of age. Enumerate the vaccines used under UIP for preventable diseases. 12 (08 P1)

Short Notes

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|-------------------------------------|--|
| 1. Epidemic curve (21 P1) | 6. Adverse events following immunisation (13 P1) |
| 2. Isolation and Quarantine (20 P1) | 7. Zoonoses (12 P1) |
| 3. Quarantine (19 P1) | 8. Herd immunity (10 P1) |



4. Pentavalent vaccine (18 P1)
5. Secondary attack rate (14 P1)
9. Cohort study (08 P1)

Explain Why

1. Rota virus vaccine has been incorporated in UIP (21 P1)
2. India is a yellow fever receptive area. (18 P1)
3. Quarantine and isolation are not synonymous. (17 P1)
4. Adverse effect following immunisation (AEFI) is not only due to vaccines (15 P1)
5. Carriers though less infectious are epidemiologically more dangerous (15 P1)
6. Lead time is not synonymous with incubation period (14 P1)
7. Randomisation is the heart of control trial-justify. (14 P1)
8. Hospital acquired infection (HAI) (12 P1)
9. Serial interval can help in finding out incubation period (11 P1)
10. Carrier stage of a disease is not amenable to control (10 P1)

Screening for Diseases

- Short Notes** 1. An ideal screening test (12 P1) 2. Criteria of screening (10,09 P1)

Explain Why

1. Lead time is the advantage gained by screening. (21 P1)
1. Screening test and diagnostic tests are not synonymous (20 P1)
2. Significance of a false positive screening test. (17 P2)
3. The term source and reservoir are not always synonymous explain with suitable example (16 P1).
4. The purpose of vaccination is not only to confer individual protection but also to reduce spread of disease in the community (11 P2)
6. Sentinel surveillance of disease is better than periodic mass screening (10 P1)

Epidemiology of Communicable Disease

Long Questions

1. In a block several cases of dengue are reported for last one month. How dengue can be diagnosed? What measures do you like to suggest for its control and prevention? 4+8 (21 P1)
2. Enumerate the high risk groups (HRGS) and bridge population in context of NACP. Explain their role in HIV transmission in India. Enumerate different services provided for HRGS under targeted intervention in NACP-IV. Explain HIV-TB collaborative activities are extremely important for control of both HIV & TB in India 2+3+4+3 (19 P1)
3. Enumerate the strategies taken for polio eradication in India. Write down the difference between IPV and OPV, Compare between IPV and f-IPV. Why IPV and b-OPV are given simultaneously in NIS? 2+3+2+5 (19 P1)
4. Many cases with fever myalgia, backache and retro-orbital pain were reported from a corporation ward of Kolkata. Few deaths were also reported among those patients. As a Corporation Medical Officer how will you investigate and manage the situation, 6+6 (18 P1)
5. Raju, 12 year old boy, bitten by a stray dog and was brought to you. On examination there were two lacerated wounds on the right leg. Dog was killed. How will you categorise the



exposure? Write down the management of the case. Explain the strategies of prevention of rabies in India. 3+5+4 (17,16 P1)

6. How will you diagnose a case presenting with cough for more than four weeks according to RNTCP guidelines? If it is a new sputum positive pulmonary tuberculosis, how will you manage the case? 6+6 (16 P1)
7. Define communicable diseases. Describe the modes of transmission of communicable diseases with suitable example. What are differences between nosocomial infection and iatrogenic infection 2+6+4 (15 P1)
8. Leprosy is a social disease and a disease of disability. Mention the social factors associated with the disease in Indian context. Briefly describe how the modes of intervention under tertiary level of prevention can be applied in control of leprosy? 4+8 (15 P1)
9. Discuss in brief the epidemiology of JE. Write down the strategies for prevention and control of JE according to NVBDCP. 5+7 (15 P1)
10. In a village there is an outbreak of measles. How will you investigate and manage the situation? 12 (14 P1)
11. Filariasis is endemic in your district. What strategies should be used to tackle the situation? 12 (14 P1)
12. An outbreak of diarrhoea was taken place in your BPHC area. Outline the steps of investigation and control measures to be adopted and recommend preventing recurrence of such outbreak, 4+4+4 (13 P1)
13. Describe in short the epidemiology and clinical presentations of leprosy. What interventions do you want to suggest at different levels of prevention of leprosy? 4+4+4 (13 P1)
14. There is rise of no. of malaria cases in your block with 2 deaths occurring within 2 years of age, Write the control measures you would undertake as per National Vector Borne Disease control guidelines. Comment on the death due to malaria below 2 years of age. 8+4 (12 P1)
15. Few cases of jaundice in urban slum of Kolkata. How will you investigate the situation? How will you apply the levels of prevention to control the situation? 6+6 (12 P1)
16. There are 10 cases of suspected malaria reported in a block. How will you investigate and manage the problem according to NVBDCP? 6+6 (11 P1)
17. A large number of students had loose motion in the morning after a grand dinner in the hostel last night. How will you investigate the outbreak? 12 (11 P1)
18. A four month old infant with ARI had a respiratory rate of 54/minute. There was no chest indrawing and no danger sign. Classify the ARI with justification and discuss management accordingly. 6+6 (10 P1)
19. A 26 year old woman having 1 year 6 months old daughter, reported in chest OPD with persistent cough, fever and weakness for last 25 days. Outline the diagnosis and management of the case as per national program. 6+6 (09 P1)

Short Notes

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|--|---------------------------------------|
| 1. Early management of Dog-bite (21 P1) | 4. Herd immunity (15 P1) |
| 2. Life-cycle of malaria parasite (19 P1) | 5. Home available fluid (HAF) (15 P2) |
| 3. Syndromic approach in management of STDs (17,16 P1) | 6. Biological transmission (14,08 P1) |
| | 7. Post-exposure prophylaxis in AIDS |

Explain Why

1. Eradication of Tetanus is not possible. (21 P1)



2. Zinc is given with ORS in treatment of Diarrhoea (20 P1)
3. Man today is viewed as an "agent" of his own disease (19 P1)
4. Hospital statistics are considered a poor guide for estimation of a disease frequency in a community. (19,11 P1)
5. Switch from trivalent to bivalent OPV as a polio end game strategy (17 P1)
6. Eradication of tetanus is not possible (17 P1)
7. Low osmolarity ORS has many advantages over previously used ORS (17 P1).
8. Zinc therapy is beneficial in management of diarrhoea (16 P1)
9. Epidemiologically measles is eradicable (16 P1)
10. Sputum microscopy is better than chest radiography in diagnosis of Tuberculosis (13 P1)
11. Tuberculosis is rising inspite of good treatment procedures (12 P1)
12. Low osmolarity ORS is better than original one (11 P1)
13. Dengue is primarily an urban disease (11 P1)
14. Role of pretest counseling for HIV/AIDS is useful (10 P1)
15. Role of IPV in polio eradication (10 P1)
16. There is no of giving advice in counseling scope (08 P1)

Epidemiology of Non-Communicable Diseases

Long Questions

1. Illustrate how different levels of prevention and modes of intervention can be applied to hypertension induced Cerebrovascular Accidents. 12 (21 P1)
2. Classify diabetes. What are the risk factors of diabetes? How do you diagnose different categories of diabetes in a patient using blood sugar level as criteria. 4+4+4 (21,20 P1)
3. What are the early signs of cancer? Describe in brief the epidemiology of oral cancer and its primary level's of prevention. 4+8 (21 P1)
4. Describe in detail about the Multi-factorial etiology of cancer. Add a note on the basic approach to the control of cancer. 6+6 (20 P1)
5. What are the criteria for diagnosis of Rheumatic fever and Rheumatic heart disease? What are the non-therapeutic measures of prevention of Rheumatic heart disease? 6+6 (19 P1)
6. Define blindness. What are the common causes of blindness in India? Delineate the structure of operation for vision 2020: The right to sight in our country. 2+4+6 (18 P1)
Similar : State the role of District Blindness Control Society to bring down the prevalence of blindness in a district (09 P1)
7. What are the risk factors of coronary heart disease (CHD)? Discuss preventive strategies of CHD 5+7 (16 P1)

Short Notes

1. Hazards of radiation (20 P1)
2. Modifiable risk factors of hypertension (20 P1)
3. Prevention of cancer cervix (14 P1)
4. Risk factors of coronary heart disease (13 P1)
5. Health effects of radiation (10 P1)
8. Rule of halves (17 P1) (09 P1)
9. Risk factors of hypertension (09 P1)



Environment & Health

Long Questions

1. Mention the characteristic of safe and wholesome water. Classify water borne diseases. Describe briefly the household level measures for water purification. 2+4+6 (20 P1)
2. Enumerate water-borne diseases, Write down the principle of chlorination of water. Define breakpoint chlorination. 12 (10 P1)

Short Notes

- | | |
|---|-------------------------------------|
| 1. Effect of noise pollution (21 P1) | 5. Indoor air pollution (14 P1) |
| 2. Removal of hardness of water (19 P1) | 6. Sanitation barrier (13,09,08 P1) |
| 3. Hazards of noise pollution (16 P1) | 7. Air pollution (12 P1) |
| 4. Swimming pool sanitation (15 P1) | 8. Breakpoint chlorination (11 P1) |

Explain Why

1. Overcrowding is a health hazard (20 P1)
2. Environmental control the best approach to control arthropods. (18 P1)
3. Chlorination is an effective method of water disinfection (18 P1)
4. Partial blocked flea is more dangerous than complete blocked flea (16,12 P1)
5. Noise pollution may be non-auditory effects on health (14 P1)
6. Slow sand filters require several days for proper functioning after installation (14,12 P2)
7. OTA test is better than OT test to detect chlorine in water (13 P1)
8. Health effects of noise pollution. (12 P1)
9. Poor housing can have adverse effects on health (10 P2)
10. Health hazards of noise (09 P1)
11. Sanitary latrine (09 P1)

Hospital Waste Management

Long Questions

1. A recent public demonstration has occurred in a Block primary health Centre about the disposal of biomedical waste contaminating water body by the side of the hospital. As a BMOH of that hospital, what measures would you like to adopt for proper waste management of your hospital. 12 (17 P1)
2. Colour coding for disposal of biomedical waste is necessary justify. Explain briefly the methods of biomedical waste management in a Medical College Hospital. 4+8 (12 P2)

Short Notes

- | | |
|--|---|
| 1. Health hazards of biomedical wastes (18 P1) | 2. Disposal of sharp waste in health care setting (16 P1) |
| 2. Principles of hospital waste management (09 P2) | |

Explain Why

1. Biomedical Waste should be segregated at source. (20 P1)
2. Injection safety is important for the recipient, provider and community (14 P1)



Health Information & Basic Medical Statistics

Long Questions : What are the different methods of presentation of data? Illustrate with suitable examples. 12 (14 P1)

Short Notes

1. Types of sampling (12 P1)
2. Census (19 P1)
3. Standard Normal Curve (18 P1)
4. Sources of health information (18,16 P1)
5. Stratified sampling (17 P1)
6. Cost effectiveness analysis in health (16P2)
7. Measures of dispersion (11,09 P1)
8. Functions of family (11 P1)
9. Measures of central tendency (10 P1)

Explain Why

1. Cost benefit and cost effective analysis are not synonymous. (19 P2)
2. Inappropriate and inadequate use of antibiotics leads to antimicrobial resistance. (18 P1)
3. Median is a better measurement in a widely dispersed data set. (16 P2)
4. Statistical averages (09 P1)

Disaster Management

Long Questions

1. Define Disaster? Write down the common causes of disaster. As a BMOH of a cyclone prone block how will you proceed for preparedness tackle the impending disaster in your block? 2+3+7 (20 P2)
2. Enumerate different hazards likely to occur during and after flood. As a BMOH, describe your prepared plan to mitigate such hazards. 4+8 (18 P1)
3. What is disaster cycle? What preparedness is required to combat water-borne diseases in a flood prone block of West Bengal? 3+9 (17 P1)
4. Your block is a flood prone area, as BMOH of that area how will you prepare the plan before-onset of the flood and also the measures that should be taken during disaster.(13 P1)

Short Notes : Triage (17 P2)

Explain Why: Triage approach can provide maximum benefits in disaster situation. (21 P1)

Health Programmes in India

Long Questions

1. Prepare an action plan to conduct an IEC campaign in your block to reduce anaemia among pregnant women. 12 (14 P)
2. Mention the beneficiaries and services provided under ICDS Scheme. Write the different methods to assess the nutritional status of a community. 2+6+4 (15 P2)
3. Name the beneficiaries of ICDS programme and the services provided to each Category. Enumerate the objectives of the programme. How does revised growth chart currently in use differ from earlier one? 4+4+4 (11 P2)



4. Define RCH? How does it differ from previous MCH program? Describe briefly the package of services for children in RCH programme. 2+4+6 (09 Pe)

Short Notes

1. Vision 2020: Right to Sight (21 P1)
2. National iron plus initiative (19 P2)
3. Role of ASHA as depot holder (16 P2)
4. JSY (Janani Suraksha Yojana) (14 P2)
5. ASHA (10 P2)

Explain Why

1. ASHA play a crucial role in primary health care system. (21,08 P1)
2. In recent times some changes has been made in National Immunisation Schedule in relation to DPT, measles and JE vaccines. (15 P2)

Demography & Family Planning

Long Questions

1. Define "family planning" and "Eligible couples". Write different methods of contraception. 2+2+8 (21 P2)
2. Enumerate different factors that attribute to higher fertility in India. Briefly explain different methods of contraception. 6+6 (20 P2)
3. Define sex ratio. What are the factors behind declining sex ratios in India?
4. What are the measures adopted to correct the present situation? 2+4+6 (19 P2)
5. A 25 years old mother with only one child aged 2 years has come to the OPD for family planning advice. Discuss the different methods of contraception that can be offered to her with merits and demerits. 12 (17 P2)
6. Describe the different factors for high fertility in India. 12 (13 P2)
7. What are the objectives of postpartum programme. As a BMOH what are the measures to be taken to improve the couple protection in your block, 4+8 (11 P2)
8. Couple protection rate in your block is 30%. Suggest measures to improve the situation. 12 (10 P2)

Short Notes

1. Population Explosion (21 P2)
2. Components of evaluation process (18 P2)
3. Emergency contraceptives (13 P2)
4. Demographic cycle (19 P2)
5. Different stages of demographic cycle (17 P2)
6. Natural family planning methods. (12 P2)

Explain Why

1. Family performs many functions. (18 P2)
2. Sex ratio in Indig is adverse to women. (12 P2)
3. IOD is not an ideal choice of contraceptive for nulliparous women (09 P1)

Preventive Medicine in Obstetrics, Paediatrics and Geriatrics

Long Questions



1. Discuss diff. factors in India related to child morbidity & mortality. 12 (21 P2)
2. Enumerate different objectives of Antenatal care. Describe briefly about the components of Antenatal care. 4+8 (20 P2)
3. What is Low Birth Weight? Enumerate the causes of Low Birth Weight and preventive measures at all levels. 2+5+5 (19 P2)
4. A child of 9 months age is brought to the clinic with diarrhoea. On examination the child was found to be restless and irritable with sunken eyes. What is your diagnosis and how will you manage the case? 2+10 (19 P2)
5. What are the major causes of neonatal mortality in India? Enlists the components of essential newborn care. What are the different newborn care facilities available at different levels of health facility? 3+3+8 (18 P2)
6. What is Maternal Mortality Ratio? How does it differ from Maternal Mortality Rate? Enlist the causes of Maternal Mortality in our country. As a medical officer, what measures will you adopt to reduce it? 2+2+3+5 (18 P2)
7. Enumerate the danger signs of mother during antenatal period, Describe the components of antenatal care for a mother attending subcentre. 2+2+8 (17 P2)
8. A pregnant woman has reported first time in a sub-centre for an antenatal check up on 20th week. What items of care will be provided to her as per RMNCH+A programme? Who will provide care there? 10+2 (16 P2)
9. An 11 month old girl child attended a subcentre complaining of loose watery stool without blood since last 5 days. On examination by the ANM, she was found to be irritable with sunken eyes, no pallor, normal weight and no history of convulsion. Classify the illness according to IMNCI and write down the management accordingly. 6+6 (16 P2)
10. Institutional delivery is very low in your block. What measures you would like to take as medical officer to improve the situation? 12 (15 P2)
11. Define neonatal mortality rate. Mention different newborn care facilities of different levels of health facility recommended by Govt. of India for reduction of neonatal mortality. Write down the responsibilities of ASHA for home based newborn care. 2+4+6 (14 P2)
12. Why early neonatal care is important? What are the objectives of early neonatal care? How can you maintain normal body temperature of a newborn? 2+5+5 (13 P2)
13. Define reproductive and child health. Enumerate the components of RCH Program. What are the packages of services for pregnant women in RCH programme? 2+4+6 (12 P2)
14. Very sudden rise of infant mortality in a block of Purulia district. What are the measures you would like to adopt to reduce IMR in the block? 12 (12 P2)
15. As a BMOH how will you reduce the IMR in your block? 12 (11 P2)
16. MMR is 5 per thousand live birth in your block. Suggest measures for reduction of MMR. 12 (10 P2)
17. What do you understand by Low Birth weight babies? How such babies be classified? Write measures for prevention of LBW babies. 2+4+6 (08 P2)
18. MMR is 7 per thousand live birth in your block. Suggest measures for reduction of MMR. 12 (08 P2)

Short Notes

- | | |
|--|---------------------------------|
| 1. Lactational amenorrhoea (21 P2) | 4. Breast feeding (14 P2) |
| 2. Exclusive breastfeeding (20 P2) | 5. FRU (11,08 P2) |
| 3. Maternal benefits under JSY (15 P2) | 6. Juvenile delinquency (09 P2) |



Explain Why

1. Nutritional surveillance should not be confused with growth monitoring (21 P2)
2. Recent trends in MCH care.(20 P2)
3. Anthropometry is an effective method for annual assessment in under- five children. (19 P2)
4. Perinatal mortality is an important indicator of MCH care (19 P2)
5. FRUS will reduce MMR. (18 P2)
6. Institutional delivery will reduce MMR to a great extent. (17 P2)
7. Growth and development are not synonymous (16,13 P2)
8. What is the justification of IMNCI approach in India? (14 P2)
9. Perinatal mortality Rate gives good indication relating to quality and quantity of health care rendered to the mothers and newborns .(13 P2)
10. RCH program has integrated the components of CSSM program in addition to its major interventions .(13 P2)
11. Breast milk is ideal and only food for the infants till 6 months of age (08 P2)

Nutrition & Health

Long Questions

1. What is balanced diet? What are the main nutritional problems in India? Discuss the preventive measures of one, 2+6+4 (21 P2)
How primary prevention plays an important role in preventing PEM? 6(20 P2)
2. How will you assess the nutritional status of a 36 months old child attending your PHC? What are the strategies that should be taken for prevention and control of PEM? 4+8 (18 P2)
3. A large no. of malnourished children have attended the OPD of your BPHG. AS a BMOH how will assess the nutritional status of this child? What measures will you take up in your community to improve the situation? 4+8 (16 P2)
4. Write down the different factors of PEM. Discuss different measures of PEM in the community. 4+8 (14 P2)
5. Enumerate the 4 major nutritional problems in India. Discuss in brief, methods of nutritional assessment of U-5 children in a community. 4+8 (10 P2)
6. Write briefly the different aspects of school health programme. Write in brief about mid-day meal programme. 6+6 (08 P2)

Short Notes

- | | |
|---|---|
| 1. Endemic Fluorosis (20 P1) | 6. Lathyrism (13,09 P2) |
| 2. Prudent diet (20 P2) | 7. Dietary goals (Prudent diet) (11 P2) |
| 3. Iodine deficiency disorder (20 P2) | 8. Pasteurisation of milk (10 P2) |
| 4. Prevention of anaemia in adolescents (18 P2) | |
| 5. Food safety (17 P2) | |

Explain Why

1. BMI is not the only method for the measurement of "Obesity". (19 P1)
2. Iodine deficiency affects all stages of life cycle. (18 P2)
3. Nutritional services under school health programme can reduce malnutrition (15 P2)



4. Dietary fibres play beneficial role in health (14 P2)
5. Parboiled rice is nutritionally superior to milled rice (12 P2)
6. RDA of beta carotene is 8 times the requirement of retinol (11 P2)
7. Nutritional surveillance should not be confused with growth monitoring (08 P1)
8. Iodisation of salt is a good example of fortification (08 P2)
9. Supplementary nutrition and therapeutic nutrition are different (08 P2)

Occupational Health

Long Questions

1. Explain briefly about the occupational hazards. Write briefly about the measures taken for general health protection of workers. 6+6 (20 P2)
2. What is occupational environment? Classify occupational diseases. Enumerate the control measures for prevention of occupational cancers. 2+5+5 (17 P2)
3. Define ergonomics. Factors responsible for various types of pneumoconiosis. How do you prevent different Occupational diseases? 2+4+6 (16 P2)
4. Define social security. Mention different benefits available for the industrial workers under ESI Act. Discuss medical benefits. 2+4+6 (15 P2)
5. Discuss the Scope of E.S.I act, Enumerate the benefits provided to the employees according to this act. 6+6 (13 P2)
6. Define social security. Enumerate different types of social security. Discuss briefly any one social security systems in our country. 2+3+7 (12 P2)
7. What do you understand by 'Sickness absenteeism'? Suggest measures directed towards its causes other than sickness in our industrial setting. 4+8 (11 P2)

Short Notes

1. The factories act, 1948 (20 P2)
2. Occupational cancer (19,10 P2)
2. Women centric provisions under Indian Factory's act (14 P2)
3. Benefits of ESI (11 P2)

Explain Why

1. Sickness absence is an important health problem in industry - explain. (21,10,08 P2)
2. Sickness absenteeism do not give actual morbidity pattern of an industry (17 P2)

Communication for Health Education

Long Questions

1. Enumerate objectives of school health programme. Discuss briefly the components of school health programme. 12 (21,17,09 P2)
2. Briefly discuss the methods of health communication. What are the barriers of communication? 8+4 (14 P2)
3. Discuss in brief the different methods of 'Group Health Education'. 12 (13 P2)
4. Mention the objectives and service components of school health programme. 6+6 (11 P2)
5. Enumerate different occupational diseases. Briefly discuss measures for control of occupational diseases, 6+6 (09 P2)



6. What are the components of communication process? Describe group discussion as a method of health communication. 6+6 (08 P2)

Short Notes 1. Barriers of communication (18,12 P2) 2. Folk media (13 P2)

Explain Why

1. Interpersonal communication is more effective for motivating people than mass communication. (17 P2)
2. What are the main components of a communication process? (06 P1)
3. Health propaganda and health education are not same (15 P2)
4. Group discussion is an effective method of communication (11 P1)
5. One way communication has several drawbacks (10 P2)
6. Interpersonal communication is better than mass media for advocacy purpose (09 P2)
7. Health education is not health propaganda (08 P2).

Health Planning & Management

Long Questions

1. Early marriage and early pregnancies amongst adolescent girls are quite rampant in a tribal area. Prepare a plan for undertaking health education programme to address the problem. 12 (21 P2)
2. Name the basic strategies to eradicate poliomyelitis. What is the objective of surveillance of acute flaccid paralysis? Describe in brief the components of surveillance of AFP, 4+2+6 (13 P1)
3. Prepare a plan for undertaking health education programme to address the problem of early marriage and early pregnancy amongst adolescent girls in a rural area. 12 (20 P2)
4. An incident of derailment of a train has occurred in your block area involving various degrees of trauma. Describe the different steps and management measures that you would undertake as a BMOH to tackle the situation. 12 (19 P2)
5. The immunisation coverage in your block has been observed to be low during last 3 years with high dropout rate. What may be the possible reasons for this situation? Outline the steps that should be undertaken as a BMOH to investigate & improve the situation. 4+8 (18 P2)
6. There is a sudden rise of infant death in a block close to international border of West Bengal state. As a BMOH how will you investigate and measures would you like to adopt to reduce IMR in the block? 6+6 (15 P2)
7. Immunisation coverage of your block is very low. As a BMOH, what measures you will take to improve the coverage? 12 (10 P2)
8. Lots of ladies die due to PPH in your block. What steps will you take as BMOH to reduce this condition in your block? 12 (08 P2)

Short Notes

1. Emergency contraceptives (18 P2)
2. Health survey and development committee (13 P2)
3. Unmet need for family planning (16 P2)
4. AYUSH (11 P2)

Explain Why



1. There is no scope of giving advice in counselling (21 P2)
2. 3 tier structure in Panchayati Raj. (20 P2)
3. "Feedback" is a key component in health planning. (18 P2)
4. Classification of STI/RTI based on clinical presentation (15 P2)
5. Network analysis is an effective management tool (10 P2)

Health Care of the Community

Long Questions

1. Define primary health care. Mention the principles of primary health care with examples. Write a note on Village Health and Nutrition Day 2+4+6 (19,11 P2)
2. Discuss how the primary health care is delivered in rural India? 12 (13,10 P1)
3. What are the elements of primary health care? Describe the functions of medical officer of a block primary health centre. 4+8 (18 P2)
4. Enumerate the different categories of manpower available at block level for delivering the primary health care, Outline the services a newborn is expected to receive from the sub-centre and ASHA from the birth up to 5 years of age.6+6 (17 P2)
5. Mention the differences between health care and medical care. Briefly describe the health care delivery system in rural India. 6+6 (09 P2)

Short Notes

- | | |
|--|-----------------------------------|
| 1. Elements of primary health care (15 P2) | 3. Appropriate technology (15 P2) |
| 2. Principles of primary health care (12 P2) | 4. Functions of PHC (08 P2) |

Explain Why

1. Role of medical officer in PHC. (20 P2)
2. ORS can be an example of one of the principles of primary health care. (14 P2)
3. Accessibility cannot be equated with acceptability of health services (11 P2)
4. Voluntary health agency play an important role in health care delivery (09 P2)
5. MO in PHC is responsible for many jobs (09 P2)

Medicine & Social Science

Short Notes

- | | |
|--|---------------------------------------|
| 1. Family diagnosis (15 P1) | 2. Socioeconomic status scale (15 P1) |
| 2. Functions of family physician (14 P2) | |

Explain Why

1. Customs do not always have negative effect on health (16 P2)
2. The word drug addiction and drug dependence are not synonymous (13 P2)

International Health

Long Questions: Criteria of new WHO child growth chart. 12 (12 P2)



Marks distribution (Theory)

Type of Questions	No. to be attempted	Total marks
LONG EASSAY TYPE	2	2×15=30
SHORT EASSAY TYPE	3	3×10=30
SHORT NOTES INCLUDING A.E.T.C.O.M.	2	2×5=10
EXPLANATORY QUESTION	5	5×4=20
MCQ	10	10×1=10
TOTAL		100



REGULAR QUESTIONS

Ear

ANATOMY OF EAR

Long Questions

1. What is middle ear cleft? Describe anatomy of medial wall of middle ear with relevant diagram. Mention applied importance of facial recess. Describe the anatomy of the tympanic membrane. Mention in brief the surgical importance of this wall 2+4+4+4+5 (2021,09,08,07)
2. Describe auditory pathway up to cerebral cortex. Draw a labeled diagram of Organ of Corti. 6+4 (2020)
3. Describe the anatomy of medial and posterior wall of middle ear. Describe the relation with facial nerve in medial & posterior wall. 10 (2011)

Short Notes

- | | |
|--|---|
| 1. Sensory supply of external ear (20) | 3. MacEwen's triangle (suprameatal). (15) |
| 2. Anatomy of facial nerve. (2005) | 4. External auditory canal. (2001) |

ASSESSMENT OF HEARING

Short Questions

- | | |
|---|----------------------------|
| 1. Pure tone audiometry. (2023) | 4. Rinne test (2000,98) |
| 2. Absolute Bone conduction test. (2015,03) | 5. Weber test (2006,04,99) |
| 3. Caloric test. (2012) | |

HEARING LOSS

Long Questions

1. A middle aged male reported with bilateral conductive deafness with intact tympanic membrane, How will you diagnose & manage the case? 5+5 (2016)
2. What is deafness? How will you manage a case of conductive deafness in a female patient aged about 25 years? 3+7 (2008)
3. A patient aged 30 yrs presented with deafness of both ears. Investigate to diagnose type of deafness, manage the case. 12 (1997)

Short Questions

1. Ototoxic drugs (2018)

ASSESSMENT OF VESTIBULAR FUNCTIONS & DISORDERS

Long Questions:



What are the common causes of vertigo? Outline the investigations that you would like to have? 12 (1998)

Short Questions : Fistula test. (2014,94)

DISEASES OF EXTERNAL EAR

Long Questions

1. Anatomy of tympanic membrane (right & left). Write different types of eardrum perforations with their clinical significance. 12 (2008 0604)

Short Questions

- | | |
|--------------------------------|--|
| 1. Tympanotomy (2022) | 5. Malignant otitis externa (2013,11,08) |
| 2. Otomycosis. (2022,08) | 6. Cerumen (2007) |
| 3. Basal cell carcinoma (2020) | 7. Impacted cerumen, (1998) |
| 4. Foreign body ear. (2012) | 8. Circumscribed otitis externa. (2010) |

DISORDERS OF MIDDLE EAR

Long Questions

1. A 20 year old man attends the OPD 'with complaint of profuse sticky discharge from both the ears after an episode of common cold 7 days back. He suffers from recurrent episodes of discharge from the ears for the last 5 years. 2+2+5+2+4
 - i) What is the most probable diagnosis?
 - ii) What other symptoms may be present in this disease?
 - iii) How can you relate the disease process for development of these symptoms?
 - iv) What are the otoscopic findings and how can you stage the disease depending on the otoscopic findings?
 - v) How will you treat the patient? (2023)
2. How will you investigate and manage the case of persistent unilateral aural discharge with hearing loss since last three yrs in a 45yrs old patient? 5+5(2022, 19)
3. Describe the aetiology, clinical feature and management of Acute Suppurative Otitis Media 3+4+3 (2018)
4. Define Cholesteatoma. Describe the pathogenesis & management of CSOM with cholesteatoma. 2+3+5 (2017)
5. A middle aged patient presents in the ENT OPD with intermittent mucopurulent discharge from one ear. How will you investigate and treat the case? 55 (2015)
6. Describe the aetiology, clinical features and management of otitis media with effusion. 3+3+4 (2014)
7. Define CSOM, Discuss the aetiology, pathology, clinical features & management of the mucosal type of CSOM, 10 (2012)
8. How do you investigate a case of long standing foul smelling ear discharge of a child of 8 years? 10 (2007)



1. Describe the anatomy of lateral wall of nose. How will you manage a case of recurrent Antrochoanal polyp? 7+3 (2023)
2. Describe anatomy of nasal septum. Draw and labeled diagram of it. 7+3 (2019)
3. Describe the anatomy of maxillary antrum and function of nose. 7+3 (2014)
4. Describe the lateral wall of nose with picture. 10 (2010,06,05,04) Mention its surgical importance. 7+3 (2005)

Short Questions

1. Dangerous area of nose (2019)
2. Osteomeatal complex.(17,13,11)
3. Inferior turbinate (2017,01)
4. Describe the anatomy of nasal septum. (12)
5. Function of nose (2006)
6. Uncinate process of nose. (2006)

NASAL SEPTUM & ITS DISEASES

Long Questions

1. Illustrate with diagram the constituents of nasal septum & its vascular supply. Describe the surgical importance of Little's area. 5+3+2 (2016)

Short Notes

1. Write a note on deviated nasal septum & its effect on the ear. (2010)
2. Little's area of nose (2006,01)
3. Complications of S.M.R. operation. (2014)
4. Difference between Septoplasty and SMR operation. (2011)
5. Septoplasty. (2008)
6. Functional endoscopy of nose. (2008)

ACUTE AND CHRONIC RHINITIS

Long Questions Aetiology, pathology, clinical features & treatment of Atrophic Rhinitis. (2004)

Short Notes: Atrophic Rhinitis (2018,09,96)

Explain Why: Empty nose syndrome in over resection of nasal turbinates. (2023)

MISC. DISORDER OF NASAL CAVITY

Long Question:

1. How to investigate a case of unilateral foul smelling discharge in a 5 years old child from nose for 3 weeks. Write differential diagnosis & management 5+5 (21)

Short note:

1. Rhinolith (2022,16)
2. CSF Rhinorrhoea (2021,14,07)
3. Foreign body impaction in nose (2022)
4. Rhinosporidiosis. (2021,04)
5. Cerebrospinal fluid rhinorrhoea (2019)



NASAL POLYP

Long Questions

1. A male patient of 15 yrs. age presented with history of recurrent severe epistaxis & nasal obstruction. What is your provisional diagnosis? How will you manage the case? 3+7 (2017)
2. A young adult presented with left sided nasal polyp. Give differential diagnosis. Outline the management of Antro-choanal polyp 2+8 (2012)

Short Notes

1. Aetiology & management of ethmoidal polyps (2020)
2. Antro-choanal polyp. (2008,93)

EPISTAXIS

Long Questions

1. How will you manage a 60 yrs male known hypertensive at emergency room with spontaneous epistaxis? What are the causes of bilateral nasal blockage? 7+3(2022)
2. How will you investigate a case of 14 year old with recurrent moderate to severe epistaxis? Write differential diagnosis and management 3+4+3(2020)
3. A 17 years old male patient presented with a history of recurrent profuse epistaxis for last one year. What are the probable causes? Give an outline of relevant investigations and management of the patient. 2+4+4(2011)
4. A 65 years old male presents with Epistaxis. How will you manage this case? 10(2010)

Short Notes

1. Dangerous area of nose. (2015,05)
2. Area of epistaxis (1999)
3. Little's area of nose. (2006,01)

Explain Why: Painless unprovoked epistaxis in Juvenile nasopharyngeal angiofibroma.

PARA NASAL SINUSES

Short Notes

1. Fungal Sinusitis (2020)
2. Write down the etiologic, clinical features & management of acute maxillary sinusitis. (2019)
3. FESS (2018)
4. Indications of Caldwell-Luc operation. (2013)
5. Antral puncture. (2012)
6. Maxillary Sinus. (2012)
7. Caldwell-Luc operation. (2009)
8. Punctate. (2007)



THROAT

DISEASES OF ORAL CAVITY & SALIVARY GLAND

Short Notes

1. How would you counsel a patient who has presented with a white patch on oral mucosa to quit smoking. (2023)
2. Lingual thyroid (2009)
3. Fossa of Rosenmullar (2004,94)

ANATOMY OF PHARYNX

Short Notes

1. Waldeyer's ring (2016)
2. Adenoid facies (2009)
3. Killian's dehiscence (2008)

TUMOURS OF NASOPHARYNX & ACUTE/CHRONIC PHARYNGITIS

Long Questions Clinical features and management of juvenile nasopharyngeal Angiofibroma. 5+5(2010)

Short Notes Keratosis pharyngitis (2006,03)

ACUTE & CHRONIC TONSILLITIS

Long Questions

1. Outline the clinical features and management of patches over tonsil 5+5 (2018)
2. Acute tonsillitis – c/f, T/t & comp 4+3+3 (2016)
Similar- Acute follicular tonsillitis (2013)
3. A 10 years child presented with patch in tonsil and fever. How you will examine and treat the child. 5+5 (2015)
4. A child has come to OPD with a patch in throat. What are the causes of patch in throat? How will you differentiate between a patch of acute follicular tonsillitis and with faucial diphtheria? 4+6 (2000)

Short Notes:

1. Vincent angina (2005)
2. Patches over tonsil and its investigation('96,'98)
3. Indications of Tonsillectomy. (2012)
4. Reactionary haemorrhage after Tonsillectomy. (2004)
5. Tonsillitis (2001)

Explain Why: Post tonsillectomy patient has a bleeding episode 7 days after operation. (2023)



HEAD NECK SPACE INFECTION

Long Question:

1. Discuss etiology, clinical features and management of acute retropharyngeal abscess. 3+3+4 (2023, 2017)
Similar: Acute peritonsillar abscess (+complication) (2012, 06)
2. A young man comes to you Quinsy, Clinical features, complications, diagnosis and treatment. 2+2+3+3 (2012, 08, 04, 98, 96, 94)

Short Notes:

- | | |
|--|--------------------------------|
| 1. Retropharyngeal abscess. (2022, 18, 02) | 2. Quinsy (16, 14, 10) |
| 2. Acute Retroph. Ab. (15, 13) | 4. Chronic Retroph. Ab. (04) |
| 3. Obstructive Sleep Apnoea (21, 13) | 6. Zeinker's diverticulum (08) |

Explain Why: Tooth infection may cause Ludwig's angina. (2023)

ANATOMY & PHYSIOLOGY OF LARYNX

Long Questions

1. Draw a neat labeled diagram of larynx as seen on indirect laryngoscopy. Describe briefly the levels and group of lymph node in the neck. 2+3 (2010)
2. Describe the pre-epiglottic space and its significance. 3+2 (2010)
3. Nerve supply and intrinsic muscle of larynx. 3+2(2006)
4. Describe the trachea & its functions.5+5 (2002)

Short Notes

- | | |
|--|----------------------------------|
| 1. Safety muscles of larynx (2021,19,16) | 3. Nerve supply of Larynx (2018) |
| 2. Functions of Larynx. (2001) | 4. Indirect laryngoscopy. (2006) |

CONGENITAL LESIONS & DISORDERS OF LARYNX & STRIDOR

Long Questions

1. How will you investigate a case of 55 year old male smoker, suffering from gradually increasing hoarseness of voice for 4 months followed by stridor for last week? Write differential diagnosis & management.3+4+3 (2020)
2. What is stridor? A child of 3 years presented with stridor for two hours. What are the common causes and outline the management in such case? 4+6 (2008,06)

Short Notes

- | | |
|--|------------------------------|
| 1. Principle of Laryngeal Crepitus test (2020) | 4. Vocal Cord polyp (2019) |
| 2. Laryngomalacia (2010) | 5. Acute epiglottitis (2014) |
| 3. Laryngeal web (1998) | |

BENIGN TUMOUR OF LARYNX

**Long Questions:**

1. A teacher consults you for his hoarse voice. The voice becomes worse towards the end of the day after the classes. 1+2+2+2+5+3 (2023)
 - i) Name one clinical condition that may explain the complaints of the patient.
 - ii) Name two other diseases/conditions that may present with similar symptoms.
 - iii) How will you examine the patient clinically to arrive at a diagnosis?
 - iv) Enumerate the investigations you will suggest to supplement your clinical findings in establishing a definite diagnosis?
 - v) What will be the findings of these investigations in each of the diseases you have mentioned ?
 - vi) What should be the treatment protocol for managing such a condition?

Short Notes

1. How would you counsel a patient, who has presented with a white patch on the oral mucosa, to quit chewing tobacco ? (2023)
2. Management of solitary thyroid nodule (2019) Bronchial cyst (2017)
3. Vocal nodule. (2014,09)/ singer's node (2003)Laryngeal papilloma (2007)
4. Laryngocoele. (2008)

VOICE & SPEECH, TRACHEOSTOMY**Long Questions**

1. A 65 old male presented with hoarseness of voice for last three months, How will you investigate the case to arrive at a diagnosis? 10 (2013)
2. A 60 years old male presented with hoarseness of voice for one month, How will you investigate the case? 10 (2011)
3. A 50 y years old patient has hoarseness of voice for over a month, Investigate & outline the management of benign/malignant growth in vocal cord. 5+5(2004)

Short Notes

- | | |
|--|-----------------------------------|
| 1. Complications of tracheostomy (2019,17,13,11) | Functions of tracheostomy. (2015) |
| 2. Steps of operation of tracheostomy (2004,03) | Types of tracheostomy (2004) |

ANATOMY & PHYSIOLOGY OF OESOPHAGUS

Long Questions: Discuss the mechanism of deglutition.10 (2009)

Short Notes

- | | |
|--------------------------------------|--|
| 1. Oesophageal Strictures. (2012,05) | 3. Constrictions of oesophagus. (2005) |
| 2. Oesophagoscopy. (2008,07) | 4. Cardiac notch (1996) |

DISORDERS OF OESOPHAGUS**Long Questions**



1. A 60 years old male has presented with progressively increasing dysphagia. How will you investigate? 10 (2021)

Short Notes

1. Plummer- Vinson syndrome /Patterson-Brown-Kelly syndrome (2020,11)
2. Coin in oesophagus (2017)
3. Cardio spasm (2009)
4. Cardiac achalasia. (2009)
5. Dysphagia lusoria (1996)

SUPPLE QUESTIONS

Ear

Long Questions

1. Mechanism of hearing, mention the middle ear conditions for hearing loss.7+3 (19)

Short Notes

1. Tympanometry.(2018)
2. Interpretations of the bi thermic caloric test.(2019)
3. NIHL(2017)
4. Cone of light reflex.(17)
5. Extra cranial complications of squamosal CSOM.(20159)

Nose

Long Questions

1. A 67-year-old male presented with history of blood stained nasal discharge with right sided facial swelling for six months. Recently visited dentist for loosening and falling teeth. Probable causes and give an outline of relevant investigations and management of the patient.3+3+4 (2020)
2. Acute frontal sinusitis: Causes, clinical features and management.3+3+4 (2019)
3. Describe the PNS functions.10 (2017)

Short Notes

1. Surgical management of atrophic rhinitis.(2019)
2. Complications of Pan Sinusitis.(2017)

Throat

Long Questions

1. Juvenile nasopharyngeal angiofibroma- Investigations and management.



2. Anatomy of larynx with emphasis on its parts, lymphatic drainage. Labeled diagram of larynx on Indirect Laryngoscopy. 4+3+3 (2020)
3. Etiology and investigations in a case of dysphagia.5+5(2017)

Short Notes :

1. Ludwig's Angina (2020)
2. Complications of adenoidectomy (2019)
3. Etiology of oral ulcers(2019)
4. Post operative management of tracheostomy.(2018)



OPHTHALMOLOGY

Marks distribution (Theory)

Type of Questions	No. to be attempted	Total marks
LONG EASSAY TYPE	2	$2 \times 15 = 30$
SHORT EASSAY TYPE	3	$3 \times 10 = 30$
SHORT NOTES INCLUDING A.E.T.C.O.M.	2	$2 \times 5 = 10$
EXPLANATORY QUESTION	5	$5 \times 4 = 20$
MCQ	10	$10 \times 1 = 10$
TOTAL		100



REGULAR QUESTIONS

ANATOMY

Long Questions

1. Name the structures forming the angle of the anterior chamber. Draw a neat labeled diagram of the angle of the anterior chamber. Name two pathological features at the angle and two abnormal contents of anterior chamber. How do you examine the structures of the angle of anterior chamber? 3+3+2+2 (2023)
2. Name the extra & Intra ocular muscles with their nerve supply. Draw a labeled diagram of eye ball 3+3+4 (2021)
3. Draw structure of angle of Anterior Chamber Formation & drainage of aqueous humour 5+5 (2021)
4. Name the extra ocular muscles of eyeball, Describe the attachments with a schematic diagram. Write the functions of each muscle. 3+4+3 (2019)
5. Describe the anatomy & physiology of lens. What is mechanism of accommodation? 4+3+3 (2016,13)
6. Discuss the theories of aqueous humour formation, circulation and drainage. 4+3+3 (2015)

Short Notes : 1.Vitreous haemorrhage (2010)

Refraction Error

Long Questions

1. What is myopia? Classify myopia. Write down the signs and symptoms of pathological myopia. 2+3+5 (2023)
2. Briefly discuss the various methods of determination of visual acuity? (2010)

Short Notes

- | | |
|---------------------------------------|---------------------------------------|
| 1. Myopia. (2022,15, 09,03) | 6. Presbyopia. (2017,05) |
| 2. Astigmatism. (2019) | 7. Contact lens. (2000) |
| 3. Hypermetropia. (2021,12) | 8. Pathological Myopia. (2014,2011) |
| 4. Surgical management myopia. (2020) | 9. Complications of myopia. (2008,05) |
| 5. Treatment of myopia. (2019) | 10. Anisometropia. (2004) |
| 6. Convex lens. (2001) | |

Eyelid

Long Questions



1. Describe the structures of upper eyelid with a labeled diagram. Mention functions of lid. Describe the glands of lid, 4+3+3(2022, 14, 05)
2. What are the causes of Entropion of Eye lid? What may its complications? (1994)

Short Notes

- | | |
|---------------------------------|-------------------------|
| 1. Internal Hordeolum (2019) | 5. Ptosis (1999) |
| 2. Blepharitis (2000) | 6. Symblepharon. (2014) |
| 3. Hordeolum internum (1998,94) | 7. Entropion .(2013) |
| 4. Lagophthalmos (1996) | |

Conjunctiva

Long Questions

1. Describe the anatomy of conjunctiva. (2011)
2. Discuss pupillary reactions, with special reference to their basis and clinical significance. (2010)
3. What do you mean by Xerosis of Conjunctiva? What are the different types of Xerosis of conjunctiva & what are the causes? Write down different stages of Vit. A deficiency and describe its management. (2002)

Short Notes

- | | |
|--|---------------------------------------|
| 1. Spring Catarrh/ Vernal conjunctivitis (2021) (2011, 07, 05) | |
| 2. Phlyctenular Conjunctivitis (2020) | 6. Bitot's spot. (2001) |
| 3. Management of recurrent Pterygium (2017,08) | 7. Subconjunctival haemorrhage (2000) |
| 4. Pterygium. (2015, 00) | 8. Pannus (1995,94) |
| 5. Xerosis of conjunctiva (1998) | |

Explain Why - Pterygium can recur after simple excision. (2023)

Cornea

Long Questions

1. Describe the layers of Cornea(diagram & clinical significance inc.). What are the factors maintaining Corneal transparency? 4+6 (2020, 07)
2. What is keratoplasty? What are types? How will you collect the donor cornea & how will you preserve it? 2+2+4+2 (2017)
3. Describe in brief the management of a case of a bacterial corneal ulcer. How would you treat a non-healing ulcer? Enumerate the complications of corneal ulcers. 5+3+2 (2015)
4. Describe the clinical features of uncomplicated bacterial corneal ulcer. Outline its management. 5+5 (2008,01)
5. Discuss etiology, clinical features, complications and management of Herpes Zoster ophthalmicus? 2+2+3+3 (2003)



6. Describe the sign symptoms and complications of a case of progressive corneal ulcer? How do you treat such a case? 3+2+2+3 (1999)
7. Describe the clinical features of Hypopyon Corneal Ulcer? How do you manage such a case? 5+5 (1996)

Short Notes

1. How will you counsel the family members of a dead person for eye donation in your hospital under hospital cornea retrieval programme. (2023)
2. Donor corneal tissue preservation('22)
3. Clinical features of vernal kerato conjunctivitis. ('13)
4. Hypopyon corneal ulcer (2016)
5. Cycloplegics. (2004)
6. Bacterial corneal ulcer.(2012)
7. Transparency of the cornea (2001)
8. Keratoplasty. (2008)
9. Eye banking and keratoplasty. ('15)
10. Hypopyon. (2002,98,94)
11. Indications of keratoplasty.(09)

Explain Why - Corneal edema can develop following endothelial damage.(2023)

Sclera

Short Notes

1. Staphyloma (2016,12,08,02)
2. Posterior staphyloma (2004)

Uvea

Long Questions

1. Classify Uveitis in different ways. Write down the symptoms and signs of anterior uveitis. Discuss the management of non granulomatous iridocyclitis. 2+5+3
2. Describe clinical features & management of Acute iridocyclitis. 5+5 (2020)
3. What are the causes of red eye? Write in brief about their differential diagnosis with management. 2+4+4 (2012, 07)
4. Describe the clinical features, management & complications of acute anterior uveitis? 3+4+3 (2004)
5. A patient attended Eye OPD with painful Red congested eye with semi-dilated Pupil. What is your diagnosis and what investigation will you do to confirm your diagnosis? Write in brief the management of the patient? 5+5+5 (2004)
6. Describe the symptoms and sign of acute iridocyclitis? How do you differentiate it from acute congested glaucoma? How do you treat such a case? (2000,98,94)

Short Notes

1. Posterior Synechiae(2021)
2. Panophthalmitis(2019)
6. Keratic precipitates. (2009)
7. Ring synechia (2002)



- | | |
|-----------------------------|-------------------------------------|
| 3. Keraticprecipitate(2018) | 8. Pthisis bulbi (2002) |
| 4. Endophthalmitis(2018) | 9. Cilliary congestion (2001) |
| 5. Red Eye. (2010) | 10.Dilated pupil in one eye. (2010) |

Lens

Long Questions

1. Write about the Preoperative work-up of a patient planned for cataract surgery. How do you assess the Visual prognosis in such a case? 7+3 (2019, 16)
2. Enumerate the post-operative complication of cataract surgery. Briefly outline the treatment of any one of them. 6+4 (2017)
3. What are the points you should note in a cataract case before surgery, both for avoiding complications & better visual result? 12 (1998)
4. What is Aphakia? What is difference between aphakia & pseudophakia? How do you manage a case of unioocular aphakia after cataract operation due to trauma?(On a patient of 20 yrs of age) 10 (2001)

Short Notes

- | | |
|--|-------------------------------------|
| 1. Cpsulotomy(2021, 01) | 8.Hypermature caturact (2009,04,99) |
| 2. Morgagnian Cataract (2020, 11) | 9. Phacolytic glauconma. (2000) |
| 3. Biometry(2018) | 10.Pseudophakia. (2005) |
| 4. Posterior capsular opacification/ After cataract (2017, 05) | |
| 5. SICS. (2013) | 11.Lamellar cataract (1998,94) |
| 6. IOL (1999) | 12. Complicated cataract. (2003) |
| 7. Early postoperative complication following cataract surgery. (2009) | |

Explain Why- Dilated fundoscopy is done for evaluation of cataract.(2023)

Lacrimal Apparatus

Long Questions

1. Discuss the anatomy of Lacrimal apparatus with diagram. How is tear is drained? 4+4+2 (2020,08). Enumerate the causes of watering of the eye.2(2018)
2. What is chronic dacryocystitis? Steps of dacryocystorhinostomy 5+5 (2016)
3. Discuss the symptoms, signs and management of chronic dacryocystitis 3+3+4 (2010)

Short Notes

- | | |
|--|--|
| 1. Tear film(2022) | 5. Epiphora. (2015,98) |
| 2. Dacryocystorhinostomy (22,09) | 6. Acute dacryocystitis. (2013) |
| 3. Syringing (2020) | 7. Syringing of the Lacrimal passage. (2012) |
| 4. Congenital dacryocystits. (2005,03) | |



Glaucoma

Long Questions

1. A 45 year old female patient presents to the eye OPD with severe pain right eye along with gross dimness of vision, nausea and vomiting, shortly after watching a movie in a theatre. What may be the possible clinical diagnosis? How will you manage this case? Mention the differential diagnosis of a red eye. 3+6+6 (2023)
2. Describe the clinical features & management of acute stage of primary angle closure glaucoma 5+5 (2022, 18)
3. How would you diagnose a case of open angle glaucoma and follow up such patient? 10 (2010)
4. Describe intraocular pressure? Discuss different conditions where the intraocular pressure is low. 2+8 (2009)
5. Describe the anatomy of the angle of anterior chamber of eye ball? Write in short your plan for medical treatment of open angle glaucoma? 5+5 (2001)

Short Notes

- | | |
|--|---------------------------------|
| 1. Anti-glaucoma drug(2021,16) | |
| 2. Bupthalmos (2017) | 6. Pan-ophthalmitis. (2014) |
| 3. Phacolytic glaucoma (2016,08) | 7. Trabeculectomy. (2014,07) |
| 4. Field changes in Primary open angle glaucoma (2015) | 8. Absolute glaucoma. (2002,96) |
| 5. Acute congestive glaucoma of one eye. (1997) | |

Retina

Long Questions

1. Describe the symptoms, signs and management of Retinoblastoma. 2+3+5 (2019)
2. A child of 3 yrs. age presented with a White reflex behind the pupil. Discuss the differential diagnosis and management in brief. 5+5 (2004,96)

Short Notes

- | | |
|---------------------------------|-------------------------|
| 1. Retinoblastoma (2021,16) | 4. Enucleation. (2011) |
| 2. Enucleation (2018) | 5. Macula lutea. (2001) |
| 3. Diabetic retinopathy. (2011) | |

Explain Why - Genetic counseling is important in retinoblastoma (2023)

Ocular Trauma

Long Questions



1. A seven years old boy was hit by a cricket ball in one eye. Enumerate the possible damage in each of the ocular structures expected in such a case. Describe the options for treatment in each injury. 7+3 (2014,00)
2. Describe the effect of blunt trauma in the eye 10 (2012)
3. A young adult patient presents with a history of blunt injury by blow in one eye. Discuss the possible lesions in brief and their management. 5+5 (2005)
4. A player sustain injury in the eye by a cricket ball. What are the possible effects of injury in different structures of eye? What first-aid will you offer in such a case? 5+5 (1999)

Short Notes

- | | |
|--|--|
| 1. Alkali burn of eye (2022,18) | 5. Removal of Corneal foreign body. (2013) |
| 2. Vitreous haemorrhage(2020) | 6. Commotio Retinae. (2003) |
| 3. Paracentesis (2016,07) | 7.Siderosis bulbi. (2001) |
| 4. Hyphema-causes and management(2019) | 8. Evisceration. (2014,12) |

Community Ophthalmology

Long Questions

1. What is night blindness? Enumerate the causes of night blindness, Write down the clinical features, management of Vit. A deficiency. 2+4+4 (2021,13)
2. Write down the different stages of Vit. deficiency and management 5+5 (12)
3. How do suspect Vit. A deficiency in a child? What are the effects in the eye in this deficiency? How do you prevent it? 2+4+4 (2000)

Short Notes

- | | |
|---------------------------------|--------------------------|
| 1. Night blindness (2019) | 3.Vision 2020. (2015,07) |
| 2. Nutritional blindness (2017) | |

Ocular Motility

Long Questions

1. Discuss briefly the management of esotropia in a 2-year-old. 10 (2010)

Short Notes

1. Difference between paralytic and non-paralytic squints. (2023)
2. Binocular vision. (2013)
3. Management of right convergent squint. (2008)

Neuro Ophthalmology

Long Questions



1. What is pupillary light reflex ? Briefly describe the pathway of pupillary light reflex with a schematic and labelled diagram. What are the drugs affecting pupillary light reflex ? 3+7+5 (2023, 17, 12)

Short Notes Papilledema (1999)

Miscellaneous

Long Questions

1. A 40 yr old lady presented to ophthalmology emergency room with acute painful dimness of vision associated with redness and lacrimation, What are the differential diagnosis? Write down the management of anyone causes 3+7 (2022, 14)
2. A 65 years old patient presented with gradual painless dimness of vision in both eye during last 2 years. Describe the differential diagnosis and management. 5+5 (2018)
3. What are the causes of seeing rainbow Halo around light? Describe the management of one such case having severe pain in the eye. 3+7 (2015)
4. A patient comes with Rainbow Haloes. How will you diagnose the case? 10 (2013)
5. Write down the causes of gradual and painless loss of vision and their differential diagnosis, 5+5 (2009,94)
6. Write down the differential diagnosis of sudden loss of vision. 10 (2007) What investigations do you suggest? 5 (2006)

Short Notes

1. Uses of Atropine in Ophthalmology (2020)
2. Side effects of topical corticosteroids. (2010)
3. Mydriatic and cycloplegic drugs (01)
4. Use of laser in eye. (2014)

Explain Why - In small children atropine should be applied in ointment form (2023)

SUPPLE QUESTIONS

Anatomy

Long Questions - Describe the conditions with abnormal size and shape of the pupil. 10 (19)

Refraction Errors

Short Questions : 1. Hypermetropia (17)

Eyelid

Short Questions : 1. Chalazion operation. (18) 2. Tarsorrhaphy. (18)



Conjunctiva

Short Questions 1. Viral conjunctivitis. (20) 2. Surgical management of pterygium (19)

Cornea

Short Questions : 1. Superficial Punctate keratitis. (17) 2. Adherent leucoma (17)

Uvea

Short Questions : 1. Iridectomy (20) 2. Phthis bulbi (18)

Lens

Long Questions - Anatomy and physiology of crystalline lens. Mechanism of accommodation. 3+3+4 (20)

Short Questions

1. Management of aphakia. (20)
2. Post op complications of cataract surgery (19)
3. Congenital cataract (18)
4. Pilocarpine. (20)

Glaucoma

Short Questions: Tonometry

Iris

Long Questions - Anatomy of iris with labeled diagram, Action and nerve supply of its muscles. (19)

Neuro Ophthalmology

Short Questions : Abnormal pupillary reflex. (20)



Type of Questions	No. to be attempted	Total marks
LONG EASSAY TYPE	2	2×15=30
SHORT EASSAY TYPE	3	3×10=30
SHORT NOTES INCLUDING A.E.T.C.O.M.	2	2×5=10
EXPLANATORY QUESTION	5	5×4=20
MCQ	10	10×1=10
TOTAL		100



REGULAR QUESTIONS

Medical Jurisprudence & Ethics

Long Questions

1. Explain the conditions must be satisfied to prove a doctor to be negligent. Mention the defences & precautions to avoid charge of medical negligence with a clarification about the applicability & limitations of contributory Negligence in this regard. 3+2+2+3 (2023)
2. Define Medical Negligence and classify with examples. Describe defence available by he doctor in a case of Medical Negligence brought against him. 1+2+2 (2016)
3. Define infamous conduct in professional sense. Enumerate the example of infamous conducts. 1+4 (2012)
4. Write in short, the constitution and function of Medical Council of India and State Medical Council. 2+24 (2011)
5. Explain the concept of serious professional misconduct and state examples that constitute the offence of serious professional misconduct. 5 (2010)

Short Notes

1. Importance of maintaining professional secrecy in medical practice with its exceptions ('23)
2. Infamous conduct. (2018)
3. Vicarious Liability. (2017)
4. Contributory negligence. (2016/12)
5. Informed consent. (2014)
5. Euthanasia. (2013)
6. Res Ipsa Loquitur. (2011)
7. Privileged communication. (2010)

Difference

1. Civil negligence and criminal negligence (2021,14, 12)
2. Professional negligence & infamous conduct. (2020/17)

Legal Procedure

Short Notes

1. Recording of dying declaration of a seriously injured patient. (2019)
2. Hostile witness. (2016,15)
3. Conduct money. (2016)

Difference

1. Dying declaration and dying deposition (2021,11)
2. Police vs Magistrate inquest. (2016)

Explain why

1. 1, In court of law, sometime leading question are permitted during examination in



2. chief. (2017)
3. Dying deposition is considered superior to flying declaration. (2012)

Identification

Long Question

1. What is mixed dentition? How will you differentiate between temporary and permanent teeth? Enumerate Gustafson's criteria. Which criteria can be applied to a living person ?
2+3+4+1 (2023)

Medicolegal Importance

- | | |
|----------------------------|--------------------------------|
| 1. Scar mark (2021,18,16) | 5. Temporary dentition (2021) |
| 2. Age 21 years. (2019) | 6. Latent finger print. (2017) |
| 3. Teeth. (2014) | 7. Biological Age. (2015) |
| 4. 18 years of age. (2012) | |

Difference

- | | |
|---|--|
| 1. Human and animal hair. (2018,11) | 3. Temporary and permanent teeth. (2015) |
| 2. Classify disorders of sexual differentiation with examples. (2023) | |

Explain why

1. Dactylography has more advantages than DNA fingerprinting. (2019)
2. Dactylography is still considered a surest datum for identification. (2015)

Difference - Medicolegal autopsy & pathological autopsy. (2017)

Thanatology & signs of Death

Long Questions

1. Enumerate immediate, early & late changes after death. Describe the mechanism of rigor mortis, 2+3 (2020)
2. A beheaded dead body of a male subject was recovered by side of a railway track with multiple stabs over chest, and abdomen. The line of traumatic severance was 1" above suprasternal notch without evidences of vital reaction, The stabs were showing insignificant zone of vital reaction. The head was found 50 feet away from the body. Autopsy findings revealed multiple petechial haemorrhagic spots over subpleural surface and interlobar fissures of lung. Nail beds and lips were showing bluish discoloration.
 - a) How will you establish the head was separated ante mortem or post mortem in nature? Write down the pathophysiology behind the formation of petechial haemorrhage and bluish discoloration. 2+3



- b) Whether the head belonged to the same individual. Define stab wound. Why the length of blade of a weapon may not correspond always with depth of stab wound over chest and abdomen? 1+2+2 (2018)
3. Define Rigor Mortis. Describe in brief its mechanism of action of formation. Discuss the other conditions mimic Rigor Mortis. 1+2+2 (2017)
4. Define Rigor Mortis. Discuss in short, the physio-chemical process of its development. Write the factors which influence its onset and distribution. 1+2+2 (2012)

Medicolegal Importance

- | | |
|---------------------------------|-------------------------|
| 1. Adipocere. (2016) | 2. Brain death. (2015) |
| 2. Exhumation. (2013) | 5. Algor Mortis. (2011) |
| 3. Post-mortem staining. (2014) | |

Short Notes

1. Criteria for declaring brain stem death. (2020)
2. Suspended animation. (2016)
3. Negative Autopsy. (2012)

Difference

1. Antemortem and post-mortem thrombus (2021)
2. Primary relaxation & secondary relaxation. (2020)

Asphyxia

Long Questions

1. Define drowning. Enumerate different types of drowning. What are the post-mortem findings in a case of death following drowning? What is the surest sign of antemortem drowning? What is Oedema Aquosum? 2+2+3+1+2 (2023)
2. Dead body of a middle-aged male subject was found in the state of hanging from the branch of a tree, There was evidence of a prominent ligature mark around the neck, cyanosis over finger nail beds and lips. There was presence of multiple small lacerated injuries with bleeding over both side of front of neck. How would establish:
 - i. Cause and nature of death
 - ii. Likely internal findings during postmortem examination,
 - iii. Time since death, 3+5+2 (2019)
3. Define strangulation. Describe the expected post-mortem findings in a dead body alleged to have died due to strangulation by ligature, 2+3 (2013)
4. Discuss the autopsy findings to opine as to the cause and nature of death in a dead body with ligature mark around neck. 5 (2011)
5. Discuss the autopsy findings that will conclude that death was due to. drowning in a dead body recently removed from water. 5 (2010)

Short Notes 1. Froth from nose & mouth in deceased. (2018)

2. Choking. (2015)

Medicolegal Importance - Hyoid bone. (2019,17)



Difference -

1. Sweet & Saline/salt water drowning. (2016,13)
2. Dry Drowning & Wet Drowning. (2012)

Explain why

1. Modified Y shaped is suitable in hanging cases (2021)
2. Diatom test is net confirmatory of death due to antemortem drowning. (2014)

Injuries

Long Questions

1. Define & Classify injury. Mention different types of abrasion and mention their medicolegal importance. 1+2+2 (2021)
2. Define bruise. How can you determine age of bruise? How does parallel bruise occurs? 1+2+2 (2017)
3. Define Mechanical Injury. Enumerate and briefly describe different types of lacerated injury. 1+2+2 (2015)

Medicolegal Importance

- | | |
|--|-------------------------------------|
| 1. Choking of firearms (2021) | 5. Abrasion collar. (2010) |
| 2. Tailing of an incised wound (2021,14) | 6. Defence wound. (2013) |
| 3. Tailing of a wound. (2019,12) | 7. Parallel lines of bruise. (2011) |
| 4. Bevelled cut. (2020) | |

Short Notes

- | | |
|---|---------------------------------|
| 1. Entry wound in a firearm injury (2021) | |
| 2. Wound of Entrance & Exit of Perforating, Penetrating wound caused by dagger (19) | |
| 3. Bevelled cut. (2016) | 4. Self-inflicted wounds (2010) |

Difference

1. Suicidal & Homicidal cut throat wound. (2019,15)
2. Wound of entrance and exit caused by outlet by bullet. (2014)
3. Ante mortem and post mortem wounds. (2010)

Explain why

1. Examination of skin around wound of entry helps to determine distance of firing. (2023)
2. Depth of stab wound may not always correspond to length of weapon in case of full length penetration. (2023)
3. Abrasion is medicolegally superior to Bruise. (2015)
4. Colour change is not seen in subconjunctival haemorrhage. (2012)
5. Mass of the bullet is mode of lead. (2014)
6. One gun shot wound of entrance with multiple exit wounds. (2012)



Regional Injuries

Medicolegal Importance

1. Evidence of bleeding from nose & ear in a head injury case. (2018)
2. Contrecoup Injury. (2016)

Difference - Traumatic cerebral haemorrhage & spontaneous cerebral haemorrhage. (2020)

Explain why

1. Stab wound over auricles are immediately fatal where as those over the ventricles are not. (2018)
1. In extremes of age, Epidural Haemorrhage is rare but Subdural Haemorrhage is common. (2017)

Thermal Injuries

Long Questions

1. A dead body of a young married woman is brought to you for P/M examination, History reveals that the deceased has succumbed to burn injuries, Under what section is the inquest by in this case conducted? ii) How do you differentiate between A/M & P/M burns on the basis of soot & COHb? ii) How do you differentiate between EDH & Heat hematoma? iv) What are the causes of death due to burn? 1+1+1+2 (2020)
2. Classify thermal injuries due to local application of treat, Describe post-mortem findings in a case of death due to antemortem burn, 2+3 (2014)

Medicolegal Importance

1. Rule of nine. (2012)
2. Arborescent marking. (2011)
2. Boxing attitude. (2010)

Difference

1. EDH due to burn and EDH due head injury by blunt force. (2018)
2. Bum and Scald. (2011)
3. Ante mortem and post mortem burns. (2010)

Explain why

1. Carbonaceous soot particles are not always present in the lumen of trachea in antemortem burns. (2021)
2. Wilson 's 1st degree burns are more painful than 3rd degree burns. (2018, 17)

Infanticide & Child abuse



Long Questions - Define still birth. Briefly describe the signs in a dead born foetus with reasoning for such signs. 1+4 (2014)

Medicolegal Importance - Age of viability of fetus. (2020)

Short Notes - 1 Battered baby syndrome. (2013 11)

2. Spalding's sign. (2010)

Difference

1. Respired & Unrespired Lungs of dead new-borns. (2019,14)
2. Live birth and still birth. (2015,13)

Explain why –

1. Hydrostatic test is not conclusive of live birth. (2011,10)
2. Caffey syndrome has a peculiar pattern of finding-both clinically & radiologically. (2023)

Impotence & Sterility

Medicolegal Importance - Surrogate mother. (2020, 14)

Short Notes

1. Sterilisation. (2018)
2. Artificial Insentation. (2011)
3. Impotence. (2013)

Explain why

1. Impotence but not sterility is the ground for divorce (2021)
2. Marriage contract with an insane person is not valid. (2019)

Virginity, Pregnancy & Delivery

Medicolegal Importance

1. Umbilical cord. (2019,17)
2. Hymen. (2015)
3. Lochia. (2015,10)
4. Pregnarncy. (2013)

Difference - True & False Virgin. (2012)

Explain why

1. Hymen has little value to test virginity. (2016,13)
2. Test for H.C.G. hormone is net confirmatory of pregnancy of a woman. (2014)
3. Precipitate labour is almost always accidental in nature. (2013)
4. Immunological test for pregnancy is not régarde as sure sign of pregnancy.(2001)

Sexual offences



Long Questions

1. A 13 year old girl is brought to you by police with alleged history of penetrative sexual assault two days back. She is being accompanied by both her parents. She tells you that the accused was a neighbor and she tried to resist him and fight back. Whom will you take the consent from? Which law will this case be registered under? How will you tell the age of the nail scratch abrasions you find on her thoracic region? What do you know about SAFE kit? Describe the procedure of medical examination of the survivor. What are the samples you will collect and for what purpose ? 1+1+3+3+5+2
2. Adolescent girl with history of alleged sexual assault has been brought to you for medical examination. 1+1+2+1 (2021)
 - i) What is the minimum age for giving consent for such examinations?
 - ii) Why presence of any female attendant is necessary during such examination?
 - iii) How would you examine the hymen in such cases?
 - iv) What are the materials to be preserved in such cases?
3. Define rape as per recent amendment of 2013 as a Medical Officer. How will you examine an unmarried girl, age around 16 years, who is alleged to have severe assaults 24 hrs. back 1+4 (2016)
4. Define rape. Discuss as a medical officer how you will you proceed to examine a girl alleged to have been raped 24 hours earlier. 1+4 (2013)

Medicolegal Importance- Vaginal swab & smear examination in sex offence cases. (2020)

Short Notes- 1. Section 377 IPC. (2019)

2. Diagnostic criteria of paraphilia. (2018)

Explain why

1. Medical evidence of sexual intercourse is not legal evidence of rape.(2020,11)
2. "Whether a subject can perform sexual intercourse"- the question given by police in requisition for medical examination of accused has no value after Criminal Law Amendment Act 2013 (2018)
3. Spermatozoa may not be found after recent sexual intercourse in alleged rape.(2015)
4. Non-detection of spermatozoa and semen in the vaginal swabs from a true victim of rape. (2010)

Forensic Psychiatry

Long Questions- Define Delusion. Briefly describe the different types of Delusion. Write Medicolegal Importance of Delusion. 1+3+1 (2015)

Short Notes

1. Feigned Insanity (2021)
2. Testamentary capacity. (2017)
3. Hallucination. (2014)
4. Civil responsibility of a mentally ill person. (2020)
5. Impulse. (2016,12)

Difference

1. True & Feigned mental ill subjects. (2019 16)



2. Psychosis and Neurosis. (2018)
3. True and Feigned insanity. (2013)

Explain why –

1. M'Naughton rule and sec.84 IPC are not same. (2023)
2. Delusion is regarded as one of the surest evidence of insanity. (2020,16)

Stain Analysis

Difference - Secretor & non-secretor (2017)

Medicolegal Importance - Saliva stain (2017)

Toxicology

GENERAL TOXICOLOGY

Long Questions - Define chelating agents. Mention the dosage, route of administration & indication of using BAL & EDTA. 1+2+2 (2020 11)

Explain why

1. Stomach tube is not used in cases of poisoning by Corrosive acids, Strychnine & Kerosene. (2020, 16)
2. BAL is not injected by intravenous route. (2019)
3. Poison may not be detected in Viscera even after death from poisoning. (2015)
4. Some amount of Fresh Potassium permanganate Solution is left in the stomach after completion of gastric Lavage. (2015)
5. Not detection of poisonous substances on chemical analysis of viscera in a case of death due to poisoning. (2010)

Short Notes

1. Write the mechanism of action of Activated charcoal (2021)
2. Whole bowel irrigation. (2019)
3. Legal responsibilities of a medical practitioner attending a case of suspected poisoning (2017)

CORROSIVE POISON

Explain why- Alkali burns are more extensive and damaging than acid burn. (2013)

Short Notes

1. Write down the specific antidote for Oxalic acid poisoning. (2014)
2. Vitriolage. (2010)

INORGANIC METALLIC IRRITANTS



Long Questions

1. Mention briefly the symptoms, signs both external & internal & management of a case of Chronic Arsenical Salt Poisoning due to consumption of water of well/tube well contaminated with Arsenic salts present in the earth. 2+2+2 (2019)
2. Name the toxic salts of arsenic. Write in short the clinical features of chronic arsenic poisoning. 1+5 (2012)

Short Notes

1. Metal fume fever. (2019)
2. Give the fatal dose of White arsenic (2014)

HEAVY METAL POISONING

Long Questions

1. What is Plumbism? Describe in short the sign, symptom and management of a Case of Plumbism. 1+4 (2015)
2. Write in short the signs, symptoms and treatment of chronic lead poisoning. 5 (2013)

Explain why- Anaemia & basophilic stippling occurs in chronic lead poisoning. (2017)

Short Notes

1. Write the Specific antidotes Chronic lead poisoning. (2011)
2. Plumbism. (2010)

ORGANIC IRRITANTS-PLANT

Short Notes

1. Give the fatal dose of Ricin (2014)
2. Mention Active principles of: Abrus precatorius, Yellow oleander Nuts Cerbera thevetia (2013)
3. Mention Active principles of Semecarpus angcardium, Croton seeds (2012)
4. Mention criminal uses in following poisons Calotropis. (2010)

ORGANIC IRRITANTS-ANIMAL

Long Questions

1. A case of alleged snake bite in a 25 year old female has been brought to you in the emergency with a tight ligature above the bite site on upper limb. How will you release the ligature? How will you differentiate between neurotoxic and haematotoxic snake bite based on symptoms? How will you manage a case of neurotoxic snake bite? What is the composition of polyvalent anti snake venom in India? 3+4+5+3 (2023)
2. A male patient is brought to emergency with history of snake bite examination revealed two pin point puncture wounds over dorsum of right foot with oozing of blood and oedema. How will you confirm your diagnosis that it was vasculotoxic snake bite? Write in short management of vasculotoxic and neurotoxic snake bite. 2+3 (2018)



3. A person alleged to have been bitten by a snake, the local people killed the snake and brought the patient and dead snake to the casualty department. Now by examination both how you will decide 2+1+2+1 (2016)
- Whether the snake was poisonous or non-poisonous.
 - How the bite mark help to consider whether it was poisonous or not?
 - What are the snakes against which the antivenom available in India is effective?
 - Name a vegetable poison which produces sign and symptom similar to snake bite.

Short Notes

- Post-mortem diagnosis of snake bite. (2019)
- polyvalent Anti snake Venom use in India. (2017)
- Specific antidote of Cobra bite. (2015)

NARCOTIC

Short Notes- Write down the specific antidote for: Morphine poisoning (2014,11)

INEBRIANTS - ALCOHOL

Long Questions- Define drunkenness. Write the treatment of methyl alcohol poisoning. 1+4 (2014)

Short Notes- Write the specific antidotes of Methanol Poisoning (2020,15)

DELIRIANT (DATURA, CANNABIS, COCAINE)

Long Questions - Which poison is commonly known as 'road side poison'? Describe clinical features of that position. 2+3 (2018)

Short Notes

- Write the active principles of Cannabis (2021,12)
- Mention the active principles of Datura & Ganja. (2020)
- Mention Active principals of: Datura. (2013)
- Mention criminal uses in following poisons: Datura seeds (2010)

SPINAL & PERIPHERAL NERVE POISON

Short Notes

- Mention the active principles of Kuchila (2020)
- Mention Active principals of Strychnas Nuxvomica (2012)

CARDIAC POISON

Short Notes

- Write the active principles of Yellow oleander (2021)
- Give the fatal dose of Aconitine, Nicotine (2014)
- Mention Active principals of Aconnite roof, (2013)



4. Aconite (2010)
5. Mention criminal uses in following poisons Aconite (2010)

HYDROCYANIC ACID POISON

Short Notes

1. Write the mechanism of action of Cyanide (2021)
2. Write the specific antidotes of Hydrocyanic acid (2020)

AGRICULTURAL POISON

Long Questions

1. A thirty year female patient came to the emergency department of the hospital with history of suicidal poisoning with organophosphorus comping.3+2 (2021)
 - i) How will you manage such case?
 - ii) What are the medicolegal duties of the doctor in relation to such case?
2. Write clinical features & management in case of accidental ingestion of parathion. What are the precaution to be taken to minimize occupational exposure? 2+2+1(2017)

Short Notes- Write the Specific antidotes: Organophosphorus poisoning (2015,11)

Explain Why- Oximes are useful in treatment of OPC poisoning if patient admitted early but totally ineffective in carbamate poisoning. (2023)

MISCELLANEOUS

Long Questions- Explain the meaning of the term 'Drug abuse' and enumerate the differences between drug habituation and drug addicting. 1+2+2 (2010)

Short Notes

1. Give the fatal dose of Kerosene oil (2014)
2. Enumerate:
 - (i) Poisons causing convulsion;
 - (ii) Poisons causing hurried respiration:
 - (iii) Poisons diagnosed by odour:
 - (iv) Poisons causing constriction of pupil. (2011)

SUPPLE QUESTIONS

Medical Jurisprudence & Ethics

Long Questions

1. Define Consent. Enumerate different consent. What is meant by the term "Loco parentis"? 3+2 (2018)
2. What are functions of medical council of India 5 (2016)
3. Define serious professional misconduct (infamous conduct).Discuss various example of it. What are the consequences of infamous conduct? 1+2.5+1.5 (2015, 08)



Short Notes - Professional Misconduct (2019)

Medicolegal Importance-

1. Contributory negligence (2014) .
2. Dichotomy (2009)
3. MTP act 1971 (2014,11)

Explain why - Blanket consent should be discouraged (2020)

Legal Procedure

Long Questions

1. A young man of 25 yrs allegedly assaulted by some person brought to the emergency ward in an unconscious state, O/E there is bleeding scalp wound on the right side scalp just above the ear during C.T, Scan within half an hour man regain consciousness and wanted to tell something. 2+2+3+3 (2019)
 - a. How will you proceed to record the dying declaration?
 - b. What is the value of dying declaration in this case?
 - c. Duties of Emergency medical officer in management of this case.
 - d. in case of death what is the probable autopsy finding determining the cause of death.
2. Describe briefly the steps of oral evidence in a court of law. What is perjury. 4+1(2014)
3. Describe in brief different criminal courts in India with their power. Write invshort the procedure of giving evidence in a court of law. 3+2 (2011)
3. Discuss about different stages of giving evidences in court? 5 (2010)

Short Notes –

1. Inquest (2019)
2. Summon (2013,11)
3. Leading question. (2008)

Medicolegal Importance - Attains of majority (2016)

Difference- Common witness & expert witness (2020)

Identification

Long Questions

1. Define intersex. Classify the disorder of sexual development with example. What will be the histological findings in testicular tissue in Klinefelter syndrome? 1+3+1 (2017)
2. Outline the procedure of medico-legal examination for estimation of age or an adolescent girl. 5 (2008)

Short Notes

1. Pseudo Hermaphrodite (2021)
2. Changes in symphyseal surface of pubis with age. (2017)
3. Accidental tattoo marks (2011)
4. Dactylography (2019)

Medicolegal Importance



- | | |
|---------------------------|---------------------------|
| 1. 8 years of age. (2018) | 3. Tattoo marks (2016,10) |
| 2. Intersex (2015) | 4. Bar-bodies (2008) |

Difference - Male, female hip bone (2019,14,10, 08)

Thanatology

Long Questions

- A dead body of a young man was brought for medicolegal autopsy. On Examination a transverse ligature mark was noted over neck below the thyroid completely encircling the neck. 1+1+3 (2021)
 - What is the probable cause & manner of death in this case?
 - Enumerate different internal postmortem findings.
 - Differentiate between hanging & strangulation.
- Dead body of a middle aged unknown male subject was found on the railway track with complete severance of neck and a ligature mark around the neck. How would you opine regarding Cause and Manner of the death of the subject? Outline the method of establishment of Identity of such a subject. 3+3+4 (2020)
- Define adipocere. What are the condition which help in formation of adipocere? What is its medico legal importance? 1+2+2 (2013)

Short Notes

- Time since death from stomach content. (2017)
- Positive & negative vital reaction (2016)

Medicolegal Importance

- | | |
|----------------------------------|-----------------------|
| 1. Post Mortem Stain. (2018) | 5. Brain death (2009) |
| 2. Mummification (2015) | 6. Maggot (2008) |
| 3. Cadaveric spasm (2014,10) | 7. Adipocere (2008) |
| 4. Suspended animation (2010,08) | |

Explain why

- Examinations of maggots are sometimes helpful in autopsy (2020)
- All Murders are homicides but all homicides are not Murder. (2019)
- Discoloration of right iliac fossa is the first external sign of putrefaction (18, 15,11, 09)
- Colour of post-mortem stain may vary in some cases (2014)
- Why decomposition occurs (2010)
- Body decomposes early in summer than in winter (2008)

Difference

- | | |
|---|----------------------------------|
| 1. Rigor mortis & cadaveric spasm (2021,09) | 3. Hypostasis and bruise (2016) |
| 2. Livor Mortis and Bruise (2017) | 4. Bruise and PM staining (2011) |

Asphyxia

Long Questions



1. Discuss the medico-legal questions likely to be asked in a case of death due to strangulation. 5 (2018)
2. The dead body of a young girl is found in a jungle with multiple nail-scratch abrasions around the mouth and nostrils, Her lips and finger-nails were found cyanosed. What is the most probable cause of death? What post-mortem findings do you expect in this case 1+4 (2015)
3. Enumerate different types of drowning deaths, describe briefly the physiopathology of fresh water wet drowning 1.5+3,5 (2014)
4. Define hanging. Describe the causes of death and PM findings in a case of death due to hanging. 1+2+2 (2013,10)

Medicolegal Importance

1. Ligature material used for mechanical asphyxia (2020)
2. Hyoid cartilage (2015)
3. Diatom test (2008)
4. Smothering (2014)

Explain why

1. Examination of scene of crime helps in case of partial hanging (2020)
2. Absence of froth does not rule out antemortem drowning. (2017)
3. Drowning in fresh water causes earlier death than salt water drowning (2014)

Difference

1. Antemortem & Postmortem hanging (2021)
2. Hanging and strangulation by ligature. (2015)
3. Typical & atypical hanging (2008)

Injuries (mechanical, firearm, thermal, regional)

Long Questions

1. What is 'Thunderclap' headache? In which intracranial haemorrhage it is found? Write down a simple bedside test for its diagnosis. Write down the most intracranial haemorrhage occurring in young subjects with a labeled diagram. Common non-traumatic cause of this 1+1+1+2 (2017)
2. What are the mechanical injuries that can be diagnosed by healing of a common mechanical injury which can be confirmed by radiological examination? 2+3 (2009)

Short Notes

1. Screening tests for blood stain identification. (2021)
2. Cartridge of shotgun. (2017)
3. Fabricated wound (2014)
4. Abrasion (2011)
5. Self-inflicted injury (2010)

Medicolegal Importance

1. Rule of Nine (2021)
2. Hesitation cut marks. (2020)
3. Nail scratch abrasions (2018)
4. Patterned abrasion. (2009)

Explain why

1. Superficial burn injury is more painful than deep burn. (2021)



2. Close range firing may not be evident on examination of gunshot wound. (2019)
3. Stab injury over right ventricle is more dangerous than over left ventricle (2014)
4. A blow over forehead may produce black eye (2008)

Difference

1. 1, Antemortem wound & post-mortem wound (2020)
2. Burn caused by dry heat and moist heat. (2019)
3. Gun shot wound of exit & entry from a Rifle weapon. (2018)
4. flame burns & scalds. (2014,13,10)
5. Difference between incised wounds & lacerated wounds. (2010)

Infanticide & Child Abuse

Medicolegal Importance- 1. Umbilical cord (2013)

Difference- Cephalhematoma and Caput succedaneum. (2021,17)

Abortion, Impotence, Sterility

Long Questions

1. Define abortion. Write in brief about the diagnosis and evidence of criminal abortion in a dead body. Add a note medico legal importance of criminal abortion. 12+2 (2021)

Explain why- Impotence but not sterility is a ground for divorce (2015)

Difference- Natural abortion & criminal abortion. (2018)

Virginity, Pregnancy, Delivery

Long Questions

1. How it can be concluded that a female subject aged about 18 years brought dead to the emergency room of a city hospital had a normal vaginal delivery about 3 days back. 5 (2009)

Short Notes

- | | |
|------------------------|------------------------------|
| 1. Lochia (2020,13) | 3. Umbilical cord.(2017) |
| 2. Pseudocyesis (2018) | 4. Precipitate labour (2015) |

Medicolegal Importance : 1.Lochia (2021) 2. Placenta(2018) 3. Pregnancy(2015)

Explain why- Quickening is not a definite sign of pregnancy. (2021)

Difference- Parous uterus and nulliparous uterus (2013)

Forensic Psychiatry

Long Questions



1. Define a mentally ill person. Discuss various ways of restraining of a mentally ill person as per mental health act 1987 1+2+2 (2016)

Medicolegal Importance- Lucid interval (2021,19,17,11)

Short note

- | | |
|--|---------------------------------|
| 1. Paraphilia (2021) | 6. Hallucination (2016) |
| 2. Delusion (2019,13) | 7. Lucid interval (2014) |
| 3. Obsessive compulsive disorder. (2018) | 8. Testamentary capacity (2010) |
| 4. Incest (2016) | 9. Obsession (2009) |
| 5. Wandering lunatic (2008) | |

Difference- Delusion and illusion (2011)

General Toxicology

Long Questions

1. A person lying under & tree during Sagar Mela with history of hyperpyrexia unconsciousness, dilated pupil. What are the possibilities and how can you differentiate? 5 (2018)
2. A person is brought to the emergency in delirious state with widely dilated pupils. His body temperature was found to be 105°F From the history it could be elicited that it took some chapati and curry offered by a fellow passenger in a train after which he developed these manifestations. 0,5+2.5+2 (2015)
 - i. What is the most probable cause?
 - ii. What are the other signs and symptoms expected to be found in this case?
 - iii. How will you manage this case?
3. Define poison .Write in short the line of treatment in case of patient brought to emergency with history of ingestion of some poison,5 (2011)
4. Define poison. Write in short the factors which modify action of a poison. 1+4 (2008)

Short Notes

1. Procedure of collection, preservation and despatch of viscera for FSL examination. (2013)
2. 2. stomach tube (2011)

Corrosive poison

Short Notes

1. Diagnostic criteria of Chronic Carbolic Acid poisoning. (2015)
2. Alkali produces more damage than acid. (2017)
3. In which poisoning we can observe yellow discoloration of tissue? What is the name of this reaction? (2015)
4. What is the colour of urine in phenol poisoning and why? (2015)
5. Mention possible fatal doses of Corrosive sublimate(2014)
6. Carbolism(2013)
7. Mention the preservatives used in carbolic acid poisoning .(2008)



Medicolegal Importance : 1. Carboluria (2011)

Explain why : 1. Urine in carbolic acid poisoning in green in colour (2014)

Inorganic metallic Irritant

Long Questions- Write in short the sign, symptom and treatment of chronic arsenic poisoning? 5 (2016)

Short Notes

1. Diagnostic criteria of Chronic arsenic Poisoning. (2018)
2. Write the antidote for Acute arsenic poisoning(2010,09)
3. Mention the preservatives to be used in sulphuric acid poisoning (2009)
4. Mention the preservatives used in Arsenious oxide white phosphorus poisoning (2008)

Heavy Metal Poisoning

Short Notes

1. Lead palsy. (2020)
2. Blood picture in chronic lead poisoning. (2017)
3. Lead line (2016)
4. Plumbism(2013)
5. Mention the preservatives to be used in lead poisoning (2009)

Organic Irritants - Plant

Short Notes

1. Name the toxalbumin present in castor seeds and ratti seeds? (2015)
2. marking nut(2011)
3. Mention specific antidotes Abrus precatorius poisoning(2014,10)
4. Toxalbumin (2010)

Organic Irritants - animal

Long Questions

1. A 30year old male patient while working in paddy field was bitten by a snake at ankle, After 4 hours he came at emergency with reddish urine. 1+1+3 (2021)
 - i) Which type of snake bite can present such symptom & what is the probable species?
 - ii) What are the other signs/ symptoms you expect in this patient
 - iii) How will you manage this patient?

Short Notes

1. Polyvalent Anti Snake venom. (2020)
2. Mention possible fatal doses of Common krait venom(2014)



3. Write the antidote for Cobra bite(2009)

Medicolegal Importance- Ophitoxemia(2011)

Narcotic

Short Notes

1. 1, Hallucination (2020)
2. Barbiturate blisters (2019)
3. Brown Sugar (2019)
4. Write the antidote for morphine poisoning(2014,10,09)
5. Mention the preservatives used in opium poisoning .(2008)

Inebriants - Alcohol

Long Questions

1. How a drunken driver may be tested for ethyl alcohol by a Traffic Sergeant? How Widmark's formula may be applied to calculate the amount of alcohol ingested in such a case? 3+2 (2020)

Short Notes

1. Alcoholic blackout (2019)
2. Preservation of blood sample in a case of drunkenness. (2017)
3. Write specific antidote of methyl alcohol(2008)

Medicolegal Importance- Pupillary changes in alcohol poisoning.(2011)

Explain why- Ethanol is used in methanol poisoning (2021)

Deliriant (Datura, Cannabis, Cocaine)

Short Notes

- | | |
|---|--|
| 1. Chronic ganja psychosis. (2021) | 4. Specific antidote in Datura poisoning(2014) |
| 2. Run amok (2020) | 5. Running amok (2011,10) |
| 3. What are the active principle of cannabis? (2016,15) | 6. Maghan's syndrone (2010) |

Spinal Peripheral Nerve Poison, Cardiac Poison

Short Notes

1. Mention the active principle of Strychnos nux-vomica(2016)
2. Mention the active principal Aconitum napellus(2016)
3. What is hippus? In which case we can observe this finding? (2015)
4. Mention the preservatives to be used in yellow oleander poisoning (2009)



Hydrocyanic acid Poison

Long Questions

1. Rohini, a 17 year old girl was brought to the Emergency in an unconscious state along with convulsions with history of consumption of bitter almond. What is your probable diagnosis? How does the almond become toxic in the body? How will you manage the case? 1+2+3 (2019)

Short Notes- Write specific antidote of hydrocyanic acid(2008)

Agricultural Poison

Long Questions

1. Write down the mechanism of action of Organophosphorus compounds. How does pralidoxime help in enzyme reactivation? Explain mydriasis is not therapeutic end point of atropinisation. 2+2+1 (2017)
2. Mention the line of treatment of a case of organ phosphorus poisoning? 5 (2014)
3. Write in short the features of acute organ phosphorus poisoning. Write the specific antidote. 2.5+2.5 (2013)
4. Describe signs and symptoms and post mortem findings of organ phosphorus compounds. 2+1+2 (2010)
5. How would you classify organophosphorus poisons? Describe in brief the management of such poison. 2+3 (2009)

Short Notes- Diagnostic criteria of Acute Organophosphorus poisoning. (2018)

Miscellaneous

Medicolegal Importance : Positive Benzidine test (2015)

Short Notes

1. Mention possible fatal doses of Phenobarbitone (2014)
2. Mention the preservatives to be used in kerosene poisoning (2009)

Difference- Drug dependence and Drug habituation. (2019)